ADAMS

01 0001 00 ADAMS COUNTY COMMUNITY COUNSELING SERVICES

165 NORTH FIRST, SUITE 120 OTHELLO, WA 99344

KATE BRUESKE ADMINISTRATOR

PHONE (509) 488-5611 FAX (509) 488-0166

MAILING ADDRESS

165 NORTH FIRST, STE 120 OTHELLO, WA 99344

MISCELLANEOUS

PREGNANT & POST-PARTUM SPANISH YOUTH ON-LINE REPORTING

TREATMENT SERVICE

- ADATSA ASSESSMENT CENTER DUI ASSESSMENT
- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

YOUTH & ADULT AND ALSO SPANISH SPEAKING SPANISH SPEAKING

ASOTIN

02 0978 00 GENESIS PROGRAM (CLARKSTON)

744 - 5TH ST., SUITE G CLARKSTON, WA 99403 LOREN CAUDLE, MA EXECUTIVE DIRECTOR

PHONE (509) 751-0409 FAX (509) 751-0392

MAILING ADDRESS 744 5TH ST., SUITE G CLARKSTON, WA 99403-2670

MISCELLANEOUS

PREGNANT & POST-PARTUM YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

ADOLESCENT & ADULT ADOLESCENT & ADULT ADOLESCENT & ADULT ADOLESCENT & ADULT

02 0146 00 ROGERS COUNSELING CENTER - CLARKSTON MAIN FACILITY

900 7TH STREET CLARKSTON, WA 99403 PETER KILLEN EXECUTIVE DIRECTOR

PHONE (509) 758-3341 FAX (509) 758-8009

MAILING ADDRESS

900 7TH ST CLARKSTON, WA 99403

MISCELLANEOUS

PREGNANT & POST-PARTUM YOUTH ON-LINE REPORTING TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

YOUTH & ADULTS

BENTON

03 0605 00

ACTION COUNSELING

1010 EAST BRUNEAU KENNEWICK, WA 99336

ROBERT LACK ADMINISTRATOR

PHONE (509) 735-7410 FAX (509) 783-5953

MAILING ADDRESS

PO BOX 5697

KENNEWICK, WA 99336

MISCELLANEOUS

PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS

03 0444 00

ADVOCATES FOR WELLNESS

(FORMERLY ADVOCATES FOR RECOVERY)

ALCOHOL & DRUG INFORMATION SCHOOL

120 VISTA WAY

KENNEWICK, WA 99336

PAUL JORGENSON

ADMINISTRATIVE DIRECTOR

PHONE (509) 783-8833

MAILING ADDRESS

120 VISTA WAY

KENNEWICK, WA 99336 TREATMENT SERVICE

TREATMENT FOCUS

ADULT & ADOLESCENT

ADULT

ADULT & ADOLESCENT

* OUTPATIENT

DUI ASSESSMENT * INTENSIVE OUTPATIENT

ADULT & ADOLESCENT

03 0546 00

BENTON AND FRANKLIN COUNTIES ASSESSMENT CENTER

2624 WEST KENNEWICK AVENUE

KENNEWICK, WA 99336-3123

CONNIE SIMPSON

SUPERVISOR

PHONE (509) 735-2704 (509) 783-0500 ASSMT CTR CRISIS#

FAX (509) 783-3355

MAILING ADDRESS

2624 W KENNEWICK AVE

KENNEWICK, WA 99336-3123

MISCELLANEOUS

SPANISH

YOUTH

ON-LINE REPORTING

2

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER DUI ASSESSMENT

* OUTPATIENT

TREATMENT FOCUS
BI-LING/SPANISH/YTH
BI-LING/SPANISH/YTH

BI-LING/SPANISH

03 1149 00

CASITA DEL RIO - UNIT I

BRANCH OF TRIUMPH TREATMENT SERVICES 1213 NORTH MORAIN LOOP KENNEWICK, WA 99336

BETH DANNHARDT DIRECTOR

DIRECTOR

PHONE (509) 734-7490 FAX (509) 734-7489

MAILING ADDRESS

PO BOX 2849

YAKIMA, WA 98907-2849

MISCELLANEOUS

PREGNANT & POST-PARTUM

TREATMENT SERVICE

* LONG-TERM RESIDENTIAL

TREATMENT FOCUS

PREG POST PT WOMEN 16 BEDS

03 1150 00

CASITA DEL RIO - UNIT II

BRANCH OF TRIUMPH TREATMENT SERVICES 1213 NORTH MORAIN LOOP

KENNEWICK, WA 99336

BETH DANNHARDT

DIRECTOR

PHONE (509) 734-7490

FAX (509) 734-7489

MAILING ADDRESS

PO BOX 2849

YAKIMA, WA 98907-2849

TREATMENT SERVICE

INTENSIVE INPATIENT

* LONG-TERM RESIDENTIAL

TREATMENT FOCUS

ADULT WOMEN 14 BEDS ADULT WOMEN 2 BEDS

03 0428 00

CHOICES AND CHANGES, INC. DRUG PROGRAM / RICHLAND

1236 COLUMBIA PARK TRAIL RICHLAND, WA 99352 DENISE GERLACH ADMINISTRATOR

PHONE FAX

(509) 735-7899 (509) 735-7698

MAILING ADDRESS

1236 COLUMBIA PARK TRAIL RICHLAND, WA 99352

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

03 1201 00

DOC - BENTON COUNTY JAIL

7122 W. OKANOGAN PLACE

KENNEWICK, WA 99336

PATTY NOBLE

CD PROGRAM ADMINISTRATOR

PHONE (360) 493-6469

BENTON

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

TREATMENT SERVICE
INTENSIVE OUTPATIENT

CORRECTIONS CORRECTIONS

03 0559 00

LIFE CHANGES CHEMICAL DEPENDENCY AGENCY - KENNEWICK

MAIN FACILITY

OUTPATIENT

313 NORTH MORAIN STREET KENNEWICK, WA 99336-2625 BARBARA GODDING EXECUTIVE DIRECTOR

PHONE (509) 783-3766 FAX (509) 783-2767

MAILING ADDRESS

313 N MORAIN ST

KENNEWICK, WA 99336-2625

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

DUI ASSESSMENT

* INTENSIVE OUTPATIENT * OUTPATIENT TREATMENT FOCUS

TREATMENT FOCUS

03 0559 01

LIFE CHANGES CHEMICAL DEPENDENCY AGENCY - PROJECT YOUTH RECOVERY

BRANCH FACILITY FOR JUVENILE JUSTICE YOUTH

5606 WEST CANAL DRIVE, SUITE 106

KENNEWICK, WA 99336

BARBARA GODDING EXECUTIVE DIRECTOR

PHONE (509) 783-2151

EXT 2466

FAX (509) 783-2767

MAILING ADDRESS

% 313 N MORAIN ST

KENNEWICK, WA 99336-2625

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

YOUTH ONLY YOUTH ONLY

03 1052 00

SOMERSET COUNSELING CENTER

680 SYMONS STREET RICHLAND, WA 99352 GARY L. SOMDAHL EXECUTIVE DIRECTOR

PHONE (509) 942-1624 FAX (509) 943-1829

MAILING ADDRESS 680 SYMONS ST

RICHLAND, WA 99352

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

YOUTH & ADULTS YOUTH & ADULTS YOUTH & ADULTS

CHELAN

04 1224 00

AALPHA - BETA

ADDICTION COUNSELING 353 MALGA-ALCOA HWY, SUITE 4 WENATCHEE, WA 98801

MARIE SERENE ADMINISTRATOR

PHONE (509) 667-8000 FAX (509) 883-6388

MAILING ADDRESS

353 MALGA-ALCOA HWY STE 4 WENATCHEE, WA 98801

TREATMENT FOCUS

ADULT ADULT ADULT ADULT

TREATMENT SERVICE
ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

04 1179 00

AALPHA/BETA IV (WENATCHEE) CLOSED

ADDICTION COUNSELING 353 MALAGA HWY, SUITES 5&7 WENTACHEE, WA 98801

MARIE SERENE ADMINISTRATOR

PHONE (509) 667-0899

MAILING ADDRESS

353 MALAGA HWY, SUITES 5&7 WENTACHEE, WA 98801

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

ADULT ADULT ADULT ADULT

04 0048 00

ADDICTION RECOVERY CENTER

AT LAKE CHELAN COMMUNITY HOSPITAL 503 E. HIGHLAND AVENUE CHELAN, WA 98816

KERRY HOUSDEN

PROGRAM ADMINISTRATOR

PHONE (509) 682-6108

(509) 682-2948 1-800-233-0045 REFERRALS

FAX (509) 682-3475

MAILING ADDRESS

P.O. BOX 908 CHELAN, WA 98816

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE INPATIENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

ADULTS ADULTS

6 BEDS

ADULTS/ADOLESCENTS ADULTS/ADOLESCENTS

CHELAN

04 1270 00 ALCOHOL AND DRUG ASSESSMENT CENTER, INC.

300 OKANOGAN AVENUE, SUITE 1-D

WENATCHEE, WA 98801

DORIS SANDERS
ADMINSTRATOR

PHONE (509) 662-5115 FAX (509) 662-5199

MAILING ADDRESS

300 OKANOGAN AVE STE 1-D WENATCHEE, WA 98801

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT

04 0939 00 BARRIER AND ASSOCIATES, INC. (E. WENATCHEE)

230 GRANT ROAD, SUITE CB-1 EAST WENATCHEE. WA 98802 SHARON L. BARRIER-YACINICH ADMINISTRATOR/OWNER

PHONE (509) 884-1020 FAX (509) 886-9290

MAILING ADDRESS

230 GRANT RD STE CB-1 EAST WENATCHEE, WA 98802

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

ADULT & YOUTH ADULT & YOUTH ADULT & YOUTH

04 0739 00 CANYON VIEW GROUP HOME

DSHS/JUVENILE REHABILITATION ADMINISTRATION

260 NORTH GEORGIA AVENUE EAST WENATCHEE. WA 98802 PAM ARENA ADMINISTRATOR

PHONE (509) 886-6283 FAX (509) 886-6285

MAILING ADDRESS

260 N. GEORGIA AVE (MS: B4-11) EAST WENATCHEE, WA 98802

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

LONG-TERM RESIDENTIAL MALE JUVENILE REHAB 8 BEDS RECOVERY HOUSE MALE JUVENILE REHAB 16 BEDS

04 0006 00 CENTER FOR ALCOHOL AND DRUG TREATMENT (THE)

327 OKANOGAN AVENUE WENATCHEE, WA 98801 LORETTA STOVER EXECUTIVE DIRECTOR

PHONE (509) 662-9673 FAX (509) 662-9441

MAILING ADDRESS

327 OKANOGAN AVE WENATCHEE, WA 98801 **MISCELLANEOUS**

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE INPATIENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

* SUB-ACUTE DETOXIFICATION

TREATMENT FOCUS

30 BEDS

ADULTS

8 BEDS

04 0705 00 QUALITY RESOURCES

QUALITY RESOURCES, LLC

1139 NORTH PRINCETON STREET, SUITE B

WENATCHEE, WA 98801

GENE JESSUP DIRECTOR

DIRECTOR

PHONE (509) 664-4013 FAX (509) 665-8543

MAILING ADDRESS

1139 N PRINCETON ST STE B

WENATCHEE, WA 98801

TREATMENT FOCUS

ADULT - ADOLESCENT

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

CLALLAM

05 0505 00 CEDAR GROVE COUNSELING, INC.

1020 CAROLINE

PORT ANGELES, WA 98362

GILL ORR DIRECTOR

PHONE (360) 452-2443

FAX (360) 452-2738

MAILING ADDRESS

1020 CAROLINE

PORT ANGELES, WA 98362

MISCELLANEOUS

PREGNANT & POST-PARTUM

ALCOHOL & DRUG INFORMATION SCHOOL

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH

DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

7

05 0766 00 DOC - CLALLAM BAY CORRECTIONS CENTER

OCO/CD TREATMENT SERVICES 1830 EAGLE CREST WAY

CLALLAM BAY, WA 98326-9723

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE
INTENSIVE OUTPATIENT

TREATMENT FOCUS
CORRECTIONAL

05 1041 00 HIGHLAND COURTE

OPERATED BY HIGHLAND COURTE, L.L.C.

1704 MELODY CIRCLE PORT ANGELES, WA 98362 SUZANNE EVICH-GIBSON EXECUTIVE DIRECTOR

PHONE (360) 417-5356 FAX (360) 417-2773

MAILING ADDRESS

1704 MELODY CIRCLE PORT ANGELES, WA 98362

TREATMENT SERVICE

TREATMENT FOCUS

* INTENSIVE INPATIENT ADULTS 33 BEDS

05 0504 00 JAMESTOWN S'KLALLAM CHEMICAL DEPENDENCY PROGRAM

1033 OLD BLYN HIGHWAY SEQUIM, WA 98382 LIZ MUELLER ADMINISTRATOR

...,

PHONE (360) 681-6767 FAX (360) 681-7288

MAILING ADDRESS

1033 OLD BLYN HWY SEQUIM, WA 98382

MISCELLANEOUS

NATIVE AMERICAN

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE
DUI ASSESSMENT
* INTENSIVE OUTPATIENT
* OUTPATIENT
* OUTPATIENT
* OUTPATIENT
* OUTPATIENT
* OUTPATIENT
* TREATMENT FOCUS
YOUTH & ADULT
YOUTH & ADULT
YOUTH & ADULT

05 0226 00 KLALLAM COUNSELING SERVICES

(FORMERLY LOWER ELWHA TRIBAL CHEMICAL DEPENDENCY PROG) 1026 EAST FIRST STREET, SUITE 2

PORT ANGELES, WA 98362

DAN CABLE PROGRAM DIRECTOR

PHONE (360) 452-4432 FAX (360) 452-4599

MAILING ADDRESS

1026 E FIRST ST STE 2 PORT ANGELES, WA 98362 **MISCELLANEOUS**

NATIVE AMERICAN YOUTH

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

05 0228 00

MAKAH CHEMICAL DEPENDENCY PROGRAM

FRONT STREET LARRY KING

NEAH BAY, WA 98357 CLININCAL SUPERVISOR

PHONE (360) 645-2461 FAX (360) 645-2465

MAILING ADDRESS

PO BOX 152

NEAH BAY, WA 98357-152

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* OUTPATIENT

NATIVE AMERICAN
NATIVE AMERICAN

05 0860 00

OLYMPIC PERSONAL GROWTH CENTER

390 E. CEDAR STREET DALE L. RICH, CDP CCDCII NCACI SEQUIM, WA 98382 OWNER/ADMINISTRATOR

PHONE (360) 681-8463 FAX (360) 681-8465

MAILING ADDRESS

PO BOX 3175 SEQUIM, WA 98382

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL
DUI ASSESSMENT
* INTENSIVE OUTPATIENT
* OUTPATIENT
ADULT
* ADULT

05 0150 00

PENINSULA COMMUNITY MENTAL HEALTH CENTER

118 EAST 8TH STREET DON ZANON

PORT ANGELES, WA 98362 EXECUTIVE DIRECTOR

PHONE (360) 457-0431 FAX (360) 457-0493

MAILING ADDRESS

118 E 8TH ST PORT ANGELES, WA 98362

CHEMICAL DEPENDENCY PROGRAM

MISCELLANEOUS
ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* OUTPATIENT

9

05 0436 00 QUILEUTE ADDICTIONS PROGRAM

QUILEUTE INDIAN TRIBAL RESERVATION 189 QUILEUTE HEIGHTS - UPPER VILLAGE

LAPUSH, WA 98350

BRENDA NIELSON ADMINISTRATOR

PHONE (360) 374-3283 FAX (360) 374-9023

MAILING ADDRESS

PO BOX 279 LAPUSH, WA 98350

LAI 0011, WA 90000

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE
ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT OUTPATIENT TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

NATIVE AMERICAN

05 0872 00 SAFE HARBOR RECOVERY CENTER - SEQUIM, INC.

609 WEST WASHINGTON STREET, SUITE 4

SEQUIM, WA 98283

CALVIN WALKER PROGRAM DIRECTOR

PHONE (360) 681-7494 FAX (360) 681-7357

MAILING ADDRESS

609 W WASHINGTON ST STE 4

SEQUIM, WA 98283

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT/ADOLESCENT ADULT/ADOLESCENT ADULT/ADOLESCENT ADULT/ADOLESCENT

05 1098 00 TRILLIUM TREATMENT CENTER

528 WEST 8TH STREET PORT ANGELES, WA 98362 TINA OAKS ADMINISTRATOR

PHONE (360) 457-9200 FAX (360) 457-9229

MAILING ADDRESS

528 W 8TH ST

PORT ANGELES, WA 98362

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

05 0956 00 TRUE STAR RECOVERY PROGRAM (CLALLAM COUNTY YOUTH SERVICES)

CLALLAM COUNTY JUVENILE & FAMILY SERVICES

1912 WEST 18TH

PORT ANGELES, WA 98363

PETE PETERSON

JUVENILE SERVICES DIRECTOR

PHONE (360) 417-2282 FAX (360) 417-2468

MAILING ADDRESS

1912 W 18TH

PORT ANGELES, WA 98363

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE OUTPATIENT YOUTH
* OUTPATIENT YOUTH

05 0873 00 WEST END OUTREACH SERVICES - OAK STREET CENTER (PORT ANGELES)

BRANCH OF FORKS COMMUNITY HOSPITAL

109 NORTH OAK STREET PORT ANGELES, WA 98362 CAMILLE SCOTT DIRECTOR

PHONE (360) 417-9456 FAX (360) 457-4924

MAILING ADDRESS

109 N OAK ST

PORT ANGELES, WA 98362

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

05 0008 00

WEST END OUTREACH SERVICES (FORKS)
FORKS COMMUNITY HOSPITAL
530 BOGACHIEL WAY

FORKS, WA 98331

CAMILLE SCOTT DIRECTOR

PHONE (360) 374-6177 FAX (360) 374-6006

MAILING ADDRESS

530 BOGACHIEL WY FORKS, WA 98331

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULTS

CLARK

06 1164 00 CHANGEPOINT, INC.

10621 N.E. COXLEY DR., SUITE 106 RICHARD DRANDOFF VANCOUVER, WA 98662 EXECUTIVE DIRECTOR

PHONE (360) 604-0068

FAX

1-877-253-5954 (360) 604-8686 **TOLL-FREE**

MAILING ADDRESS

% PO BOX 92067 PORTLAND, OR 97292

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE OUTPATIENT

OUTPATIENT

06 0894 00 COLUMBIA RIVER MENTAL HEALTH

CENTER FOR DUAL DIAGNOSIS RECOVERY 6926 EAST FOURTH PLAIN BOULEVARD VANCOUVER, WA 98661-7254

GREGORY ROBINSON PROGRAM MANAGER

PHONE (360) 993-3172

(360) 993-3000

TTY (360) 993-3001 FAX (360) 993-3047

MAILING ADDRESS

PO BOX 1337

VANCOUVER, WA 98666-1337

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER DUI ASSESSMENT

* OPIATE DEPENDENCY TREATMENT

* OUTPATIENT

TREATMENT FOCUS

ADULT, COD-DUAL DIAG

ADULT, COD-DUAL DIAG

06 0686 00 COLUMBIA TREATMENT SERVICES

7017 NE HIGHWAY 99, SUITE 114 VANCOUVER, WA 98665 SHIRLEY MADISON PROGRAM DIRECTOR

PHONE (360) 694-7484 FAX (360) 694-7479

MAILING ADDRESS

7017 NE HIGHWAY 99 STE 114 VANCOUVER, WA 98665

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

06 1020 00 **DAYBREAK - VANCOUVER (MALE-YOUTH INPATIENT)**

BRANCH OF DAYBREAK OF SPOKANE

2924 FALK ROAD

VANCOUVER, WA 98661

MICHAEL OTT

PATTY NOBLE

PATTY NOBLE

ADMINISTRATOR

CD PROGRAMS ADMINISTRATOR

TREATMENT DIRECTOR

PHONE (509) 624-3227 FAX (509) 835-4272

MAILING ADDRESS

C/O 11711 E SPRAGUE #D4 SPOKANE, WA 99206

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

* INTENSIVE INPATIENT MALE YOUTH ONLY 16 BEDS

06 0779 00 **DOC - CLARK COUNTY WORK RELEASE**

> OCO/CD TREATMENT SERVICES 5197 NW LOWER RIVER ROAD

VANCOUVER, WA 98660

(360) 493-6469 PHONE (360) 407-3961 FAX

TREATMENT FOCUS

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS OUTPATIENT CORRECTIONAL

06 0775 00 **DOC - LARCH CORRECTIONS CENTER**

> OCO/CD TREATMENT SERVICES 15314 NE DOLE VALLEY ROAD

YACOLT, WA 98675-9531

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS PO BOX 41123 (MS 41123)

OLYMPIA, WA 98504-1123

MISCELLANEOUS ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

LONG-TERM RESIDENTIAL CORRECTIONAL 72 BEDS

06 1161 00 **DOC - VANCOUVER COMMUNITY JUSTICE CENTER**

9105-B N.E. HWY 99 VANCOUVER, WA 98665

PHONE (360) 571-4350

 FAX YTBD

MAILING ADDRESS PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123 TREATMENT SERVICE INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS CORRECTIONS CORRECTIONS

06 0850 00 KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - VANCOUVER

> CASCADE PARK MEDICAL OFFICE 12607 E MILL PLAIN BOULEVARD VANCOUVER, WA 98684-4098

DAN P. RUSH CLINICAL DIRECTOR

PHONE (360) 256-7104 FAX (360) 896-4478

MAILING ADDRESS 12607 E MILL PLAIN BLVD VANCOUVER, WA 98684-4098

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE OUTPATIENT **ADULTS**

OUTPATIENT ADULTS/ADOLESCENTS

06 0882 00 KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - VANCOUVER

SALMON CREEK MEDICAL OFFICE

14406 N.E. 20TH AVENUE DAN P. RUSH VANCOUVER, WA 98684 CLINICAL DIRECTOR

> PHONE (360) 253-2317 FAX (360) 571-3008

JOHN COX

MAILING ADDRESS 14406 NE 20TH AVE VANCOUVER, WA 98684

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE OUTPATIENT **ADULTS**

OUTPATIENT ADULTS/ADOLESCENTS

06 0009 00 LIFELINE CONNECTIONS

> FORMERLY CLARK COUNTY COUNCIL ON ALCOHOL AND DRUGS 1601 EAST FOURTH PLAIN BOULEVARD, BUILDING 17

VANCOUVER, WA 98661 **EXECUTIVE DIRECTOR**

PHONE (360) 696-1631 (360) 696-4486 FAX

MAILING ADDRESS

PO BOX 1678

VANCOUVER, WA 98668-1678

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DULASSESSMENT

INTENSIVE INPATIENT 48 BEDS

* INTENSIVE OUTPATIENT

OUTPATIENT

ADULT/YOUTH RECOVERY HOUSE

10 BEDS * SUB-ACUTE DETOXIFICATION 12 BEDS 06 1040 00 NORTHWEST CD PROFESSIONALS

> 1515 BROADWAY ST VANCOUVER, WA 98663

JULIE GIROUX ADMINISTRATOR

(360) 737-1994 PHONE FAX (360) 737-6739

MAILING ADDRESS

1515 BROADWAY ST VANCOUVER, WA 98663

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADULT ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH

06 0560 01 NORTHWEST RECOVERY CENTER

MENTAL HEALTH NORTHWEST 1601 E. FOURTH PLAIN BOULEVARD, BUILDING #17

VICKIE SMITH VANCOUVER, WA 98660 PROGRAM MANAGER

> (360) 695-1297 PHONE FAX (360) 695-9690

MAILING ADDRESS

PO BOX 5827

VANCOUVER, WA 98668-5827

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

YOUTH/ADULT AND CO-OCCUR. DISORDER

06 0353 00 RIVERCREST PROFESSIONAL TREATMENT CENTER

> WHEELER SERVICES, INC. 1801 "D" STREET, SUITE 5 VANCOUVER, WA 98663

ROBERT WHEELER ADMINISTRATOR

PHONE (360) 696-3307

MAILING ADDRESS 1801 "D" ST, STE 5 VANCOUVER, WA 98663

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

06 0028 00 STARTING POINT, INC. - MILL PLAIN CLINIC

2703 EAST MILL PLAIN BOULEVARD VANCOUVER, WA 98661

JUDY DEVASIER, LCSW CLINICAL DIRECTOR

(360) 696-2010 PHONE FAX (360) 695-8590

CLARK

MAILING ADDRESS

2703 EAST MILL PLAIN BLVD VANCOUVER, WA 98661

TREATMENT SERVICE

OUTPATIENT

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

TREATMENT FOCUS

ADULTS ADULTS ADULTS ADULTS

06 0745 00

THE RIGHT CHOICE - VANCOUVER

316 EAST 4TH PLAIN BLVD, SUITE C VANCOUVER, WA 98663

> PHONE (360) 696-1023 FAX (360) 696-0067

EVELYN J. MEYER, CDSII ADMINISTRATOR/OWNER

MAILING ADDRESS

316 EAST 4TH PLAIN BLVD, SUITE C VANCOUVER, WA 98663

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

YOUTH & ADULT YOUTH & ADULT ADULT ADULT

06 1120 00

VANCOUVER TREATMENT SOLUTIONS

BRANCH OF WCHS, INC. - CRC HEALTH CORPORATION 2009 N.E. 117TH STREET, SUITE 101 VANCOUVER, WA 98686

TERRY LAKE ADMINISTRATOR

PHONE (360) 566-9112

MAILING ADDRESS

2009 NE 117TH ST STE 101 VANCOUVER, WA 98686

TREATMENT SERVICE
OPIATE DEPENDENCY TREATMENT

TREATMENT FOCUS

OPIATE ADDICTED

06 0013 00

VETERANS ADMINISTRATION - SUBSTANCE ABUSE TX PROGRAM (SATP)

SATP OF THE PORTLAND VETERANS ADMINISTRATION MEDICAL CENTER ST. JOHNS BLVD & 4TH PLAIN BLVD VANCOUVER, WA 98661

JAMES M. SARDO, PH.D. PATIENT CARE LINE MANAGER

PHONE (360) 690-1841 FAX (360) 737-1419

MAILING ADDRESS

P.O. BOX 1035 (V3-SATP) PORTLAND, OR 97207

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE OUTPATIENT TREATMENT FOCUS

CO-OCC DIS VETERANS

06 0541 00 WESTERN PSYCHOLOGICAL AND COUNSELING SERVICES, P.C.

5305 EAST 18TH STREET, SUITE B

VANCOUVER, WA 98661

DARYL E. QUICK OWNER/ADMINISTRATOR

PHONE (360) 906-1190 FAX (360) 906-1193

MAILING ADDRESS

5305 E 18TH ST STE B VANCOUVER, WA 98661

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADULTS/ADOLESCENTS ADULTS/ADOLESCENTS

COLUMBIA

07 0014 00 BLUE MOUNTAIN COUNSELING OF COLUMBIA COUNTY

221 EAST WASHINGTON STREET

DAYTON, WA 99328

KENNETH ROUGHTON, PH.D. EXECUTIVE DIRECTOR

PHONE (509) 382-1164 FAX (509) 382-1166

MAILING ADDRESS

221 E WASHINGTON ST DAYTON, WA 99328

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

ADULT/YOUTH

COWLITZ

08 0983 00 ADDICTIONS RECOVERY CENTER - LONGVIEW BRANCH

PROVIDENCE CENTRALIA HOSPITAL 1322 COMMERCE AVENUE

LONGVIEW, WA 98632

DEEDE MOHAN, R.N. PROGRAM MANAGER

PHONE (360) 414-8771

1-800-622-4009

FAX (360) 414-8776

MAILING ADDRESS

P.O. BOX 1507

CHEHALIS, WA 98532

MISCELLANEOUS

JCAHO ACCREDITED

YOUTH

COWLITZ

TREATMENT SERVICE

- * ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**
- * INTENSIVE OUTPATIENT
- * OUTPATIENT

08 1193 00 **AWAKENINGS**

920 FIR STREET LONGVIEW, WA 98632 MELODY LORENZO **ADMINISTRATOR**

PHONE (360) 423-2806 FAX (360) 423-5128

MAILING ADDRESS

920 FIR ST

LONGVIEW, WA 98632

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

TREATMENT FOCUS

08 1206 00 **COWLITZ INDIAN TRIBE**

COWLITZ TRIBAL TREATMENT PROGRAM 1055A - 9TH AVENUE LONGVIEW, WA 98632

JIM SHERRILL **ADMINISTRATOR**

PHONE (360) 575-8277 (360) 575-1948 FAX

MAILING ADDRESS

PO BOX 2429

LONGVIEW, WA 98632

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER **DUI ASSESSMENT**

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

08 0780 00

DOC - LONGVIEW WORK RELEASE

OCO/CD TREATMENT SERVICES 1821 FIRST AVENUE

LONGVIEW, WA 98632

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 (360) 407-3961 FAX

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

OUTPATIENT

TREATMENT FOCUS CORRECTIONAL

08 0151 00 DRUG ABUSE PREVENTION CENTER (CASTLE ROCK)

MAIN RESIDENTIAL FACILITY 2232 S. SILVER LAKE RD

CASTLE ROCK, WA 98611

GUS NOLTE

EXECUTIVE DIRECTOR

PHONE (360) 274-3262 FAX (360) 274-3345

MAILING ADDRESS

PO BOX 890

KELSO, WA 98626-0081

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE INPATIENT ADULT 19 BEDS
* LONG-TERM RESIDENTIAL ADULT 19 BEDS

08 1022 00 DRUG ABUSE PREVENTION CENTER (DRUG COURT)

BRANCH OF DRUG ABUSE PREVENTION CENTER

600 BROADWAY GUS NOLTE

LONGVIEW, WA 98626 EXECUTIVE DIRECTOR

PHONE (360) 425-5855 FAX (360) 501-6131

MAILING ADDRESS

PO BOX 890

KELSO, WA 98626-0081

TREATMENT SERVICE TREATMENT FOCUS

* OUTPATIENT DRUG COURT

08 0151 01 DRUG ABUSE PREVENTION CENTER (LONGVIEW INPATIENT & OP)

BRANCH OF DRUG ABUSE PREVENTION CENTER

600 BROADWAY GUS NOLTE

LONGVIEW, WA 98632 EXECUTIVE DIRECTOR

PHONE (360) 425-9210 FAX (360) 501-6131

MAILING ADDRESS

PO BOX 890

KELSO, WA 98626

MISCELLANEOUS

PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

DUI ASSESSMENT

* INTENSIVE INPATIENT & PPW 4 BEDS

* INTENSIVE OUTPATIENT
* LONG-TERM RESIDENTIAL & PPW 12 BEDS

* OUTPATIENT

COWLITZ

08 1276 00 DRUG ABUSE PREVENTION CENTER-WOMAN'S SERVICES

620-B GRADE STREET

KELSO, WA 98626

FLOYD NOLTE **EXECUTIVE DIRECTOR**

PHONE (360) 425-9600 FAX (360) 425-9604

MAILING ADDRESS PO BOX 890 KELSO, WA 98626

OUTPATIENT

TREATMENT SERVICE **DUI ASSESSMENT** INTENSIVE OUTPATIENT

TREATMENT FOCUS WOMEN ONLY WOMEN ONLY WOMEN ONLY

08 0535 00 **FIRST PLACE**

OUTPATIENT ALCOHOL/DRUG TREATMENT AGENCY

1839 FIRST AVENUE, SUITE 1A AND 1B

LONGVIEW, WA 98362

D. JACK SOMMERFELD **ADMINISTRATOR**

PHONE (360) 577-7442

MAILING ADDRESS

P.O. BOX 1077 KELSO, WA 98626

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

08 0849 00 KAISER PERMANENTE DEPT. OF ADDICTION MEDICINE - LONGVIEW/KELSO

1230 SEVENTH AVENUE

LONGVIEW, WA 98632

DAN P. RUSH CLINICAL DIRECTOR

PHONE FAX

(360) 636-2400 (360) 636-6242

MAILING ADDRESS 1230 SEVENTH AVE LONGVIEW, WA 98632

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE OUTPATIENT **ADULTS**

OUTPATIENT ADULTS/ADOLESCENTS

08 0968 00 **NUEVA LUZ, LTD.**

1905 - 7TH AVENUE LONGVIEW, WA 98632 SIXTO VARGAS, JR. **ADMINISTRATOR**

FAX

PHONE (360) 636-5110

1-800-841-1017 (360) 636-5135

TOLL FREE

MAILING ADDRESS

1905 7TH AVE

LONGVIEW, WA 98632

MISCELLANEOUS

SPANISH YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

SPANISH & ENGLISH

SPANISH-ENGL. ADULT SPANISH-ENGL. ADULT

08 1166 00

SOUTHWEST WASHINGTON SAFEHAVEN

1441 - 11TH AVENUE

LONGVIEW, WA 98632

SHELIA ROCKWOOD

ADMINISTRATOR & CLINICAL SUP.

PHONE (360) 577-4340 FAX (360) 577-4350

MAILING ADDRESS

PO BOX 781

LONGVIEW, WA 98632

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

YOUTH ALSO

YOUTH ALSO

YOUTH ALSO

YOUTH ALSO

08 0028 02

STARTING POINT - LONGVIEW BRANCH

BRANCH OF STARTING POINT, INC. (IN CLARK COUNTY)

1315 HEMLOCK

LONGVIEW, WA 98632

JUDY DEVASIER CLINICAL DIRECTOR

PHONE FAX

(360) 423-1563 (360) 423-0559

MAILING ADDRESS

1315 HEMLOCK

LONGVIEW, WA 98632

TREATMENT SERVICE TREATMENT FOCUS **ADULTS**

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT OUTPATIENT

ADULTS ADULTS

ADULTS

FERRY

10 0019 00

CHANGE POINT OF FERRY COUNTY COMMUNITY SERVICES - REPUBLIC

42 KLONDIKE RD

REPUBLIC, WA 99166

ROBERT SCHWARTZ **ADMINISTRATOR**

PHONE

FAX

(509) 775-3341 (509) 775-2937

MAILING ADDRESS

42 KLONDIKE RD

REPUBLIC, WA 99166

MISCELLANEOUS

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

YOUTH & ADULT

10 1266 00 COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - INCHELIUM

CONFEDERATED TRIBES OF THE COLVILLE RESERVATION

320 SHORT-CUT ROAD INCHELIUM, WA 99138

ROBERTA HANSEN ADMINISTRATOR

FAX

PHONE (509) 722-7067

800-573-9343 (509) 722-7071

MAILING ADDRESS

PO BOX 150

NESPELEM, WA 99155

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

10 1268 00 COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - KELLER

11669 SOUTH HIGHWAY 21 KELLER, WA 99140 ROBERTA HANSEN ADMINISTRATOR

PHONE (509) 634-2260

MAILING ADDRESS

PO BOX 150

NESPELEM, WA 99155

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

FRANKLIN

11 1148 00 BENTON-FRANKLIN COUNTIES DETOX CENTER

BRANCH OF COMMUNITY HEALTH CENTER LA CLINICA

1020 SOUTH 7TH PASCO, WA 99301 OCTAVIANO SALAS ADMINISTRATOR

FAX

PHONE (509) 547-9000

(509) 547-9000

MAILING ADDRESS

% 720 WEST COURT ST STE #8

PASCO, WA 99301

TREATMENT FOCUS

TREATMENT SERVICE

* SUB-ACUTE DETOXIFICATION

12 BEDS

11 0758 00 DOC - COYOTE RIDGE CORRECTIONS CENTER

OCO/CD TREATMENT SERVICES

1301 N. EPHARTA CONNELL, WA 99326 PATTY NOBLE CD PROGRAMS ADMINISTRATOR

> PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS
ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

LONG-TERM RESIDENTIAL CORRECTIONAL 100 BEDS

11 0863 00 DOC - TRI CITIES WORK RELEASE

OCO/CD TREATMENT SERVICES 524 EAST BRUNEAU

KENNEWICK, WA 99336

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS
ON-LINE REPORTING

TREATMENT SERVICE INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS
CORRECTIONAL
CORRECTIONAL

11 0252 02 LOURDES COUNSELING CENTER - PASCO

520 NORTH 4TH ST. PASCO, WA 99301

BERNIECE L. KROLL, CDP CD UNIT DIRECTOR

PHONE (509) 546-2377 FAX (509) 546-2360

MAILING ADDRESS

520 N 4TH ST PASCO, WA 99301

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE

DULASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

11 1103 00 NUEVA ESPERANZA COUNSELING CENTER

COMMUNITY HEATLH CENTER LA CLINICA 720 WEST COURT STREET, SUITE 8 PASCO, WA 99301

GUILLERMO CASTANEDA LACLINICA ADMINISTRATOR

ADMINISTRATOR

PHONE (509) 545-6506

(509) 547-2204

FAX (509) 546-0520

FRANKLIN

MAILING ADDRESS

720 WEST COURT ST STE 8 PASCO, WA 99301

MISCELLANEOUS

SPANISH

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

SPANISH SPEAKING SPANISH SPEAKING SPANISH SPEAKING

SPANISH SPEAKING

11 0457 00 UNITY COUNSELING SERVICES

303 NORTH 20TH

PASCO, WA 99301

VIRGINIA RICKERTSEN

DIRECTOR

PHONE (509) 547-9545 FAX (509) 546-0557

MAILING ADDRESS

303 N 20TH

PASCO, WA 99301

MISCELLANEOUS

PREGNANT & POST-PARTUM

SPANISH

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

ENGLISH / SPANISH ENGLISH / SPANISH ENGLISH / SPANISH

* INTENSIVE OUTPATIENT

DUI ASSESSMENT

* OUTPATIENT

ENGLISH / SPANISH

GARFIELD

12 0146 01 GARFIELD COUNTY HUMAN SERVICES - POMEROY OFFICE

BRANCH OF ROGERS COUNSELING CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

856 MAIN STREET

POMEROY, WA 99347

PETER KILLEN

EXECUTIVE DIRECTOR

PHONE (509) 843-3791 FAX (509) 843-3548

MAILING ADDRESS

PO BOX 758

POMEROY, WA 99347-0758

MISCELLANEOUS

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* OUTPATIENT

WOMEN SPECIFIC

GRANT

13 0848 00 ALCOHOL DRUG DEPENDENCY SERVICE - EPHRATA BRANCH ADDS

BRANCH OF ADDS OF ELLENSBURG 114-1/2 FIRST STREET N.W. EPHRATA, WA 98823

SKIP MYNAR DIRECTOR

PHONE (509) 925-9821 FAX (509) 963-3941

MAILING ADDRESS C/O 708 PENN ST MOSES LAKE, WA 98837

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

13 0912 00 ALCOHOL DRUG DEPENDENCY SERVICE - MOSES LAKE BRANCH ADDS

708 PENN STREET MOSES LAKE, WA 98837 SKIP MYNAR DIRECTOR

PHONE (509) 764-5206

1-800-245-2335 TOLL FREE

FAX (509) 764-5207

MAILING ADDRESS

708 PENN ST

MOSES LAKE, WA 98837

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

13 1056 00 CHOICES UNLIMITED

CHEMICAL DEPENDENCY SERVICES 325 MIDWAY AVENUE, SUITE D GRAND COULEE, WA 99133

MARTINA T. KEMPF PROGRAM MANAGER

PHONE (509) 633-7540 FAX (509) 633-7541

MAILING ADDRESS

PO BOX 51

GRAND COULEE, WA 99133

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

ADULT

ADULT

13 0022 00 **GRANT COUNTY PREVENTION AND RECOVERY CENTER (PARC)**

> 1525 EAST WHEELER ROAD MOSES LAKE, WA 98837

JENNIFER LANE **COUNTY COORDINATOR**

PHONE (509) 765-5402 FAX (509) 766-2589

MAILING ADDRESS

PO BOX 1217

MOSES LAKE, WA 98837-0185

MISCELLANEOUS

PREGNANT & POST-PARTUM **SPANISH** YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS **ADULT & YOUTH**

SPANISH SPEAKING

GRAYS HARBOR

A HEALTHY RISK COUNSELING CENTER 14 0737 00

> 315 WEST MARCY STREET MONTESANO, WA 98563

JEFFREY NOEL CO-ADMINISTRATOR

PHONE (360) 249-2297

1-800-789-0208 **TOLL FREE**

FAX (360) 249-2298

MAILING ADDRESS 315 WEST MARCY STREET MONTESANO, WA 98563

MISCELLANEOUS

SPANISH

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

ADULT/BI-LINGUAL ADULT/BI-LINGUAL ADULT/BI-LINGUAL

DOC - MONTESANO FIELD OFFICE 14 1200 00

219 PIONEER AVE. E.

PATTY NOBLE MONTESANO, WA 98563 CD PROGRAM DIRECTOR

> PHONE (360) 533-9276 (360) 249-5590 FAX

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

TREATMENT SERVICE INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

14 1075 00 DOC - STAFFORD CREEK CORRECTIONS CENTER

OCO/CD TREATMENT SERVICES

191 CONSTANTINE WAY

ABERDEEN, WA 98520

PATTY NOBLE

CD PROGRAM ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE
INTENSIVE OUTPATIENT

LONG-TERM RESIDENTIAL

TREATMENT FOCUS

CORRECTIONS

CORRECTIONS 10 BEDS

14 1172 00 DRUG AND ALCOHOL SCREENING, LLC

614 WEST MARKET STREET

ABERDEEN, WA 98520

ESTHER MCCUE MANAGER

PHONE (360) 533-3161 FAX (360) 533-3994

MAILING ADDRESS

614 W MARKET ST

ABERDEEN, WA 98520

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

TREATMENT FOCUS

14 0747 00 GRAYS HARBOR COUNTY CRISIS CLINIC

BRANCH OF EVERGREEN CHEMICAL DEPENDENCY COUNSELING CENTER

615 EIGHTH STREET

HOQUIAM. WA 98550

MARK GRANNEMANN EXECUTIVE DIRECTOR

PHONE (360) 538-2889

FAX

(360) 532-8786

MAILING ADDRESS

205 EIGHTH STREET

HOQUIAM, WA 98550

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* SUB-ACUTE DETOXIFICATION 4 BEDS

14 0025 00 HARBORCREST BEHAVIORAL HEALTH

GRAYS HARBOR COMMUNITY HOSPITAL

1006 NORTH "H" STREET

ABERDEEN, WA 98520

LARRY KAHL DIRECTOR

PHONE (360) 533-8500 (360) 537-6454

MAIN # DETOX

FAX (360)

(360) 537-6492

MAILING ADDRESS

1006 NORTH "H" ST ABERDEEN, WA 98520

27

GRAYS HARBOR

MISCELLANEOUS

JCAHO ACCREDITED PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT SERVICE

ACUTE DETOXIFICATION ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE INPATIENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

8 BEDS

16 BEDS

ADULT PPW CUP, TANF

ADULT PPW CUP, TANF

14 0740 00

NORTHWEST INDIAN TREATMENT CENTER - ELMA

308 E. YOUNG STREET ELMA, WA 98541

JUNE O'BRIEN DIRECTOR

PHONE (360) 482-2674 (360) 482-1413 FAX

MAILING ADDRESS

PO BOX 477 ELMA, WA 98541

MISCELLANEOUS

PREGNANT & POST-PARTUM CARF ACCREDITED NATIVE AMERICAN **ON-LINE REPORTING**

TREATMENT SERVICE

DUI ASSESSMENT

* INTENSIVE INPATIENT INTENSIVE OUTPATIENT

OUTPATIENT * RECOVERY HOUSE TREATMENT FOCUS

ADULT NATIVE AMERIC.

ADULT NATIVE AMERIC.

ADULT NATIVE AMERIC. ADULT NATIVE AMERIC. ADULT NATIVE AMERIC.

10 BEDS

20 BEDS

14 0045 00

QUINAULT INDIAN NATION

QUINAULT CHEMICAL DEPENDENCY PROGRAM 116 QUINALT STREET

TAHOLAH, WA 98587

DAVID HAGEN PROGRAM MANAGER

PHONE (360) 276-8211 FAX (360) 276-9991

MAILING ADDRESS

P.O. BOX 189

TAHOLAH, WA 98587

MISCELLANEOUS

NATIVE AMERICAN ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

28

14 0127 01 SOCIAL TREATMENT OPPORTUNITY PROGRAMS, II, INC. (STOP) - ABERDEEN

2700 SIMPSON AVENUE SUITE 201

ABERDEEN, WA 98520

VINCENT MCCRAY ADMINISTRATOR

PHONE (360) 533-4997

MAILING ADDRESS

PO BOX 1016

ABERDEEN, WA 98520

MISCELLANEOUS

CARF ACCREDITED

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

14 1048 00 ST. PETER CHEMICAL DEPENDENCY CENTER - ABERDEEN ADATSA

BRANCH OF PROVIDENCE ST. PETER CHEMICAL DEPENDENCY CENTER

415 WEST WISHKAH STREET

ABERDEEN, WA 98520

MIKE KERLIN PROGRAM DIRECTOR

PHONE 1-800-332-0465 FAX (360) 493-5085

MAILING ADDRESS

% 4800 COLLEGE ST SE

LACEY, WA 98503

MISCELLANEOUS

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* ADULT, TANF, PPW

14 1085 00 ST. PETER CHEMICAL DEPENDENCY CENTER - HOQUIAM

BRANCH OF PROVIDENCE ST. PETER CHEMICAL DEPENDENCY CENTER

508 1/2 EIGHTH STREET, SUITE 300

HOQUIAM, WA 98550

MIKE KERLIN PROGRAM DIRECTOR

PHONE (360) 533-8813

(360) 533-8814 (800) 332-0465

FAX (360) 533-1016

MAILING ADDRESS

% 4800 COLLEGE ST SE

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GRAYS HARBOR

14 0847 00 SUNRISE COUNSELING - WESTPORT

1200 N. MONTESANO, SUITE 105

WESTPORT, WA 98595

CINDY LANDENGLOS ADMINISTRATOR

PHONE (360) 268-9051

MAILING ADDRESS

PO BOX 1004

WESTPORT, WA 98595

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14 0966 00

TRUE NORTH - ESD 113 - GRAYS HARBOR

EDUCATIONAL SERVICE DISTRICT 113 - BRANCH

104 K STREET

ABERDEEN, WA 98520

ROB VINCENT SAP DIRECTOR

PHONE (360) 464-6870 HDQTRS

(360) 464-6872 LEAD COUNS

MESSAGE

FAX (360) 464-6906

MAILING ADDRESS

% 601 MCPHEE ROAD SW OLYMPIA, WA 98502

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YOUTH YOUTH

14 0096 00

TSAPOWUM / CHEHALIS TRIBAL CHEMICAL DEPENDENCY PROGRAM

420 HOWANUT DRIVE OAKVILLE, WA 98568

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(360) 273-5911

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PO BOX 536

OAKVILLE, WA 98568

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ISLAND

15 0827 00 COMPASS HEALTH - LANGLEY

5455 MAXWELLTON ROAD LANGLEY, WA 98260 STANLEY BAXTER ADMINISTRATOR

PHONE (360) 321-4868 FAX (360) 678-3636

MAILING ADDRESS

% PO BOX 160

COUPEVILLE, WA 98239

TREATMENT SERVICE

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15 0826 00 COMPASS HEALTH - CAMANO ISLAND

127 N.E. CAMANO DRIVE CAMANO ISLAND, WA 98292 STANLEY BAXTER ADMINISTRATOR

PHONE (360) 387-4719 FAX (360) 387-7259

MAILING ADDRESS 127 NE CAMANO DR CAMANO ISLAND, WA 98292

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PPW, YOUTH, ADULT

15 1160 00 COMPASS HEALTH - COUPEVILLE

105 N.W. 1ST STREET COUPEVILLE, WA 98239

ADMISTRATOR

PHONE (360) 678-5555

STANLEY BAXTER

MAILING ADDRESS

PO BOX 160

COUPEVILLE, WA 98239

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15 0345 02 COMPASS HEALTH - OAK HARBOR

390 NORTHEAST MIDWAY, SUITE B-202

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STANLEY BAXTER ADMINSTRATOR

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15 0982 00 CROSBY CENTER WEST (FREELAND)

1635 EAST MAIN STREET

FREELAND, WA 98249

GLORY LOETTERLE ADMINISTRATOR/OWNER

PHONE (360) 331-4010 TTY (800) 833-6388 FAX (360) 331-3072

MAILING ADDRESS

PO BOX 161

FREELAND, WA 98249

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15 0862 00 ISLAND ASSESSMENT AND COUNSELING CENTER, INC.

520 EAST WHIDBEY, SUITE 205 OAK HARBOR, WA 98277 TIM LIDDLE ADMINISTRATOR

PHONE (360) 675-5782 FAX (360) 675-9115

MAILING ADDRESS

520 E WHIDBEY STE 205 OAK HARBOR, WA 98277

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JEFFERSON

16 0898 00 **GRAY WOLF RANCH, INC. (PORT TOWNSEND)**

> 4148 HASTINGS ROAD ELWOOD BERNAS, JR. PORT TOWNSEND, WA 98368 **ADMINISTRATOR**

> > PHONE (360) 385-5505 (360) 385-3605 FAX

MAILING ADDRESS

PO BOX 102

PORT TOWNSEND, WA 98368

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RECOVERY HOUSE MALE: YOUTH/ADULT 26 BEDS

16 0810 00 SAFE HARBOR RECOVERY CENTER, INC. FPC (PT TOWNSEND) AND

> BEACON OF HOPE, INC. NPC 686 LAKE STREET, SUITE 400

GLEEFORD KESSLER, JR. PORT TOWNSEND, WA 98368 PRESIDENT/CEO

> PHONE (360) 385-3866 FAX (360) 385-7288

MAILING ADDRESS

686 LAKE ST, STE 400 PORT TOWNSEND, WA 98368

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16 0951 00 **TURNING POINT RECOVERY**

> 11086 RHODY DR. KIMBERLY VASENDA PORT HADLOCK, WA 98339 ADMINISTRATOR

> > PHONE (360) 385-4855

> > (360) 385-4788 (360) 385-4799 FAX

MAILING ADDRESS

PO BOX 1572

PORT HADLOCK, WA 98339

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KING

17 1258 00 A CHANGE COUNSELING SERVICES, INC. - VASHON ISLAND

17205 VASHON HIGHWAY SOUTH, SUITE D2

VASHON, WA 98070

CLARENCE FARMER DIRECTOR OF PROGRAMS

PHONE (206) 463-2721 FAX (206) 463-2751

MAILING ADDRESS

17205 VASHON HIGHWAY SOUTH, SUITE D2 VASHON, WA 98070

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17 1263 00 A-1 SOLUTIONS COUNSELING SERVICE - KIRKLAND

11901 - 124TH AVENUE N.E. KIRKLAND, WA 98034

ADMINISTRATOR

ANNE LARSON

PHONE (425) 823-4400

MAILING ADDRESS 11901 - 124TH AVE NE

11901 - 1241H AVE NE KIRKLAND, WA 98034

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17 1265 00 A-1 SOLUTIONS COUNSELING SERVICE - SHORELINE

1207 NORTH 200TH, SUITE 212 SHORELINE, WA 98133 ANNE LARSON ADMINISTRATOR

PHONE (206) 418-1200

MAILING ADDRESS 1207 N 200TH STE 212 SHORELINE, WA 98133

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17 1205 00 ALCOHOL DRUG SERVICES OF WASHINGTON - AUBURN

4204 AUBURN WAY N., SUITE 8 AUBURN, WA 98002 THERON MORGAN ADMINISTRATOR

PHONE (253) 939-2243 FAX (253) 859-4981

MAILING ADDRESS

4204 AUBURN WAY N STE 8 AUBURN, WA 98002 TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

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17 1216 00

ALCOHOL DRUG SERVICES OF WASHINGTON - RENTON

140 RAINIER AVENUE SOUTH, SUITE 103

RENTON, WA 98055

THERON MORGAN **ADMINISTRATOR**

PHONE FAX

(425) 430-9548 (425) 204-9467

MAILING ADDRESS

140 RAINIER AVE S STE 103

RENTON, WA 98055

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17 0030 00

ALCOHOL/DRUG 24-HOUR HELP LINE

CRISIS INTERVENTION, INFO & REFERRAL FOR CHEMICAL DEPENDENCY

PO BOX 80243

SEATTLE, WA 98108-0243

ANN FORBES DIRECTOR

PHONE (206) 722-3700 CRISIS# (800) 562-1240 **TOLL FREE**

(206) 722-3703 **BUSINESS**#

 FAX

(206) 722-1032

MAILING ADDRESS

PO BOX 80243

SEATTLE, WA 98108-0243

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17 1269 00

ALL ABOUT CHOICES, INC.

1833 AUBURN WAY NORTH, SUITE J

AUBURN, WA 98002

BRIAN KECK ADMINISTRATOR

PHONE FAX

(253) 218-0317 (253) 218-0886

MAILING ADDRESS

1833 AUBURN WAY NORTH, SUITE J

AUBURN, WA 98002

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17 0419 00 ALPHA CENTER FOR TREATMENT - BOTHELL

10614 BEARDSLEE BOULEVARD, SUITE D

BOTHELL, WA 98011

CAROLYNE PIETZ ADMINISTRATOR

PHONE (425) 483-4664

1-888-429-9399 TOLL FREE

FAX (425) 487-2721

MAILING ADDRESS

10614 BEARDSLEE BLVD STE D

BOTHELL, WA 98011

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17 1225 00 ALTERNATIVE COUNSELING

19115 S. WEST VALLEY HIGHWAY, #H-110

KENT, WA 98032

BETTY KASSUHN ADMINISTRATOR

PHONE (425) 251-1933

(206) 250-0766 FAX (425) 251-4996

MAILING ADDRESS

1915 S WEST VALLEY HWY #H-10

KENT, WA 98032

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17 0198 00 ALTERNATIVES - SEATTLE

1530 EASTLAKE AVENUE EAST, SUITE 305

SEATTLE, WA 98102

PAUL TRIBBLE ADMINISTRATOR

PHONE (

FAX

(206) 323-4750 (206) 323-9563

MAILING ADDRESS

1530 EASTLAKE AVE E STE 305

SEATTLE, WA 98102

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RELAPSE GROUP

17 0999 00 ARCH RECOVERY FOUNDATION NFP

33838 PACIFIC HIGHWAY S, SUITE A-101

FEDERAL WAY, WA 98003

FRANK BOARDMAN ADMINISTRATOR

PHONE FAX (253) 815-0137 (253) 568-1070

MAILING ADDRESS

1911 SW CAMPUS DR #104 FEDERAL WAY, WA 98023-6473

36

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

17 1207 00 ARMSTRONG ALCOHOL AND DRUG RECOVERY, LLC

331 ANDOVER PARK EAST #251

TUKWILA, WA 98188

JAMES ARMSTRONG
PROGRAM ADMINISTRATOR

PHONE (206) 575-1958 FAX (206) 575-1959

MAILING ADDRESS

625 STRANDER BLVD STE C TUKWILA, WA 98188

TREATMENT SERVICE

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17 1163 00 ASIAN AMERICAN CHEMICAL DEPENDENCY TREATMENT SERVICE

3150 RICHARDS RD., SUITE 203

BELLEVUE, WA 98005

TAE SON LEE

EXECUTIVE DIRECTOR

PHONE (253) 941-2287 FAX (253) 946-1660

MAILING ADDRESS

24823 PACIFIC HWY S STE 108

KENT, WA 98032

TREATMENT SERVICE

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ASIAN/PAC ISLANDER ASIAN/PAC ISLANDER ASIAN/PAC ISLANDER ASIAN/PAC ISLANDER

17 1001 00 ASIAN COUNSELING AND REFERRAL SERVICE (ACRS)

720 8TH AVENUE SOUTH, SUITE 200

SEATTLE, WA 98104

YOON JOO HAN, MSW PROGRAM DIRECTOR

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MAILING ADDRESS

720 8TH AVE S STE 200 SEATTLE, WA 98104

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TREATMENT FOCUS

ADULTS/ASIAN/PI ADULTS/ASIAN/PI ADULT/YOUTH/ASIAN/PI ADULT/YOUTH/ASIAN/PI 17 1141 00 ASIAN-AMERICAN CHEMICAL DEPENDENCY TREATMENT SERVICES

ACTS

24823 PACIFIC HIGHWAY SOUTH, SUITE 106

KENT, WA 98032

TAE SON LEE

EXECUTIVE DIRECTOR

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ASIAN/PACIFIC ISLAND ASIAN/PACIFIC ISLAND ASIAN/PACIFIC ISLAND ASIAN/PACIFIC ISLAND

17 1253 00 ASSESSMENT AND TREATMENT ASSOCIATES- KENT/AUBURN

4508 AUBURN WAY NORTH, SUITE B

AUBURN, WA 98002

TRACIE MEYE ADMINISTRATOR

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4568 AUBURN WAY N SUITE B

AUBURN, WA 98002

TREATMENT SERVICE TREATMENT FOCUS

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17 1187 00 ASSESSMENT AND TREATMENT ASSOCIATES, INC.

13353 BEL-RED ROAD, SUITE 101

BELLEVUE, WA 98005

KEN UHRICH

EXECUTIVE DIRECTOR

PHONE (425) 289-1600 FAX (425) 289-1602

MAILING ADDRESS

13353 BEL-RED RD STE 101

BELLEVUE, WA 98005

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17 0456 00 ASSOCIATED BEHAVIORAL HEALTH CARE, INC. - WEST SEATTLE BRANCH

4701 41ST AVENUE S.W., SUITE 120

SEATTLE, WA 98116-4534

ALEX BAIRD ADMINISTRATOR

PHONE (206) 935-1282 FAX (206) 937-1380

MAILING ADDRESS

4700 42ND AVE SW SUITE 480 SEATTLE, WA 98116-4561

ALCOHOL & DRUG INFORMATION SCHOOL

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17 0816 00 ASSOCIATED BEHAVIORAL HEALTH CARE, INC. (BELLEVUE)

MAIN FACILITY

1800 - 112TH AVE. NE STE 150W

BELLEVUE, WA 98004

AMY OSTERHOUT-HOFEDITZ

ADMINISTRATOR

TREATMENT FOCUS

PHONE (425) 646-7279 FAX (425) 646-7499

MAILING ADDRESS

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17 0922 00 ASSOCIATED BEHAVIORAL HEALTH CARE, INC. (SEATTLE BRANCH)

1155 N.E. 130TH STREET, SUITE 202 AMY OSTERHOUT SEATTLE, WA 98133 ADMINISTRATOR

PHONE (206) 306-8450 FAX (206) 306-8354

MAILING ADDRESS 1155 N 130TH ST STE 202 SEATTLE, WA 98133

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17 0156 00 AUBURN YOUTH RESOURCES

816 F STREET S.E. JIM BLANCHARD AUBURN, WA 98002 ADMINISTRATOR

PHONE (253) 939-2202 FAX (253) 735-1894

MAILING ADDRESS 816 F STREET S.E.

AUBURN, WA 98002

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17 1019 00

AVALON CENTER, THE

2622 ALKI AVENUE S.W., #106

SEATTLE, WA 98116

NIGEL B. LOTT **ADMINISTRATOR**

FAX

PHONE (206) 935-6228

(206) 935-0343

MAILING ADDRESS

PO BOX 442

VASHON ISLAND, WA 98070

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17 0210 00

BELLEVUE PROBATION DIVISION

475 - 112TH AVENUE SOUTHEAST

BELLEVUE, WA 98004

TANDRA SCHWAMBERG PROBATION MANAGER

PHONE (425) 452-6956 FAX (425) 452-7883

MAILING ADDRESS

PO BOX 90012

BELLEVUE, WA 98009-9012

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17 1137 00

BRIDGE WAY TREATMENT SERVICES

1800 - 112TH AVENUE N.E., SUITE 260E

BELLEVUE, WA 98004

DENISE HIPP ADMINISTRATOR

PHONE (425) 283-5315

FAX (425) 454-5495

MAILING ADDRESS

1800 112TH AVE NE STE 260E

BELLEVUE, WA 98004

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17 0343 00

CATHOLIC COMMUNITY SERVICES - SEATTLE/KING COUNTY

CATHOLIC COMMUNITY SVCS OF W. WA

100 - 23RD AVENUE SOUTH SEATTLE, WA 98144-2302

GAIL DUBIN ADMINISTRATOR

PHONE (206) 328-5774

FAX

(206) 328-5909

MAILING ADDRESS

100 23RD AVE S

SEATTLE, WA 98144-2302

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17 1125 00 CATHOLIC COMMUNITY SERVICES - SOUTH KING COUNTY

1229 WEST SMITH STREET

KENT, WA 98032

GAIL DUBIN ADMINISTRATOR

PHONE (253) 854-0077

TTY (253) 850-2503 FAX (253) 850-2503

MAILING ADDRESS

PO BOX 398 KENT, WA 98032

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17 0938 00 CENTER FOR COUNSELING & HEALTH RESOURCES / DESMOINES

BRANCH OF THE CENTER, INC. 22323 PACIFIC HIGHWAY SOUTH

DESMOINES, WA 98198

LAURA MINOR

ADMINISTRATOR/TX DIRECTOR

PHONE (360) 629-4842 FAX (360) 629-2462

MAILING ADDRESS % PO BOX 700

EDMONDS, WA 98020

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17 0159 00 CENTER FOR HUMAN SERVICES (YOUTH & NORTH * STAR PROGRAMS)

17018 15TH AVENUE N.E. SHORELINE, WA 98155-5126 BERATTA GOMILLION EXECUTIVE DIRECTOR

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MAILING ADDRESS

17018 15TH AVE NE SHORELINE, WA 98155-5126

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17 0169 00 CENTRAL YOUTH AND FAMILY SERVICES

1901 MARTIN LUTHER KING JR WAY SOUTH

SEATTLE, WA 98144

MERVYN A. CHAMBERS EXECUTIVE DIRECTOR

PHONE (206) 322-7676 FAX (206) 726-7585

MAILING ADDRESS

1901 MARTIN LUTHER KING JR WAY S

SEATTLE, WA 98144

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17 0478 00 CHRYSALIS RECOVERY, INC.

816 NORTH 38TH STREET

SEATTLE, WA 98103

TURFF

ADMINISTRATOR

PHONE (206) 547-2171

MAILING ADDRESS

816 NORTH 38TH STREET SEATTLE, WA 98103

TREATMENT SERVICE

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17 0185 00 CIRCLE OF RECOVERY, INC.

1207 N. 200TH ST, STE 104

SEATTLE, WA 98133

NELS O. KJELLIN ADMINISTRATOR

PHONE (206) FAX (206)

(206) 542-1136 (206) 542-1138

MAILING ADDRESS

1207 N. 200TH ST, STE 104 SEATTLE, WA 98133

TREATMENT SERVICE
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17 0721 00 COASTAL TREATMENT SERVICES, INC. - BELLEVUE

ADVANCED ALCOHOL/DRUG TREATMENT SERVICES

14730 N.E. 8TH STREET, SUITE 110

BELLEVUE, WA 98007-4128

MARGARET FERRIS CLINIC DIRECTOR

PHONE (425) 646-4406

TTY

(800) 833-8384

FAX

(425) 646-4409

MAILING ADDRESS

14730 NE 8TH ST STE 110

BELLEVUE, WA 98007-4128

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17 1177 00

COMMUNITY PSYCHIATRIC CLINIC - BELLEVUE

EASTSIDE REGIONAL SERVICE CENTER

13133 BEL-RED ROAD BELLEVUE, WA 98005 KELLI NOMURA CLINICAL DIRECTOR

PHONE (425) 454-3021 FAX (425) 454-3062

MAILING ADDRESS

% 4319 STONE WAY N SEATTLE, WA 98103

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17 0876 00

COMMUNITY PSYCHIATRIC CLINIC - BELLTOWN

2329 FOURTH AVENUE SEATTLE, WA 98121 KELLI NOMURA CLINICAL DIRECTOR

PHONE (206) 461-3649 FAX (206) 461-8391

MAILING ADDRESS

C/O 4319 STONE WY N SEATTLE, WA 98103

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* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT ADULT ADULT

YOUTH & ADULT YOUTH & ADULT

17 0877 00

COMMUNITY PSYCHIATRIC CLINIC - BRIDGEWAY

3825 BRIDGEWAY NORTH SEATTLE, WA 98103 KELLI NOMURA CLINICAL DIRECTOR

PHONE (206) 632-5009 FAX (206) 545-0753

MAILING ADDRESS

C/O 4319 STONE WY N SEATTLE, WA 98103

CARF ACCREDITED

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULTS ADULT **ADULT**

YOUTH & ADULT YOUTH & ADULT

TREATMENT FOCUS

COMMUNITY PSYCHIATRIC CLINIC - CITY CENTER BRANCH 17 0878 00

418 SECOND AVENUE EXTENSION SOUTH

SEATTLE, WA 98104-2876

KELLI NOMURA CLINICAL DIRECTOR

PHONE (206) 461-3209 FAX

(206) 461-8322

MAILING ADDRESS

C/O 4319 STONE WY N SEATTLE, WA 98103

MISCELLANEOUS

CARF ACCREDITED

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

OUTPATIENT YOUTH & ADULT

17 0875 00 **COMMUNITY PSYCHIATRIC CLINIC - NORTHGATE BRANCH**

10501 MERIDIAN AVE N., SUITE D

SEATTLE, WA 98133

KELLI NOMURA CLINICAL DIRECTOR

PHONE FAX

(206) 461-4544 (206) 461-6939

MAILING ADDRESS

C/O 4319 STONE WY N SEATTLE, WA 98103

MISCELLANEOUS

CARF ACCREDITED

YOUTH

ON-LINE REPORTING

TREATMENT FOCUS TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

ADULTS ADULT ADULT

YOUTH & ADULT

YOUTH & ADULT

COMMUNITY PSYCHIATRIC CLINIC - WALLINGFORD HOUSE 17 0874 00

4120 STONE WAY NORTH

SEATTLE, WA 98103

KELLI NOMURA CLINICAL DIRECTOR

PHONE FAX

(206) 461-3707 (206) 632-2437

MAILING ADDRESS

4319 STONE WY N SEATTLE, WA 98103

CARF ACCREDITED

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER

* OUTPATIENT

TREATMENT FOCUS

ADULTS ADULTS

17 1195 00

COMMUNITY PSYCHIATRIC CLINIC- SEATTLE

400 YESLER WAY, 1ST FLOOR SEATTLE, WA 98104

KELLI NOMURA CLINICAL DIRECTOR

PHONE (206) 461-3614

FAX (206) 634-3596

MAILING ADDRESS

C/O 4319 STONE WAY N SEATTLE, WA 98103

MISCELLANEOUS

CARF ACCREDITED

TREATMENT SERVICE

TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

* INTENSIVE OUTPATIENT

17 0183 00 **COMPREHENSIVE ALCOHOL SERVICES (CAS)**

1609 S. CENTRAL AVENUE #1

KENT, WA 98032

JAMES THEROU **ADMINISTRATOR**

PHONE (253) 859-5487

FAX (253) 859-9557

MAILING ADDRESS

1609 S CENTRAL AVE #1

KENT, WA 98032

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

17 1191 00

CONSEJO COUNSELING AND REFERRAL - EASTSIDE BRANCH

1412 - 140TH PLACE N.E.

BELLEVUE, WA 98007

KATHLEEN VAN TRIES CD PROG SUPERVISOR

PHONE (425) 747-7892 FAX (425) 746-4511

MAILING ADDRESS

1412 140TH PL NE

BELLEVUE, WA 98007

MISCELLANEOUS

DUI ASSESSMENT

SPANISH

* OUTPATIENT

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

ALCOHOL & DRUG INFORMATION SCHOOL

TREATMENT FOCUS

SPANISH

SPANISH

SPANISH

SPANISH

45

17 0038 00 **CONSEJO COUNSELING AND REFERRAL - SEATTLE**

3808 SOUTH ANGELINE

SEATTLE, WA 98118

MARIO PAREDES **ADMINISTRATOR**

(206) 461-4880 PHONE FAX (206) 461-6989

MAILING ADDRESS

3808 S ANGELINE SEATTLE, WA 98118

MISCELLANEOUS

SPANISH YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- INTENSIVE OUTPATIENT
- * OUTPATIENT

17 0734 00 **CORP RECOVERY (COCAINE OUTREACH & RECOVERY PROGRAM)**

815 SOUTH WELLER STREET, SUITE 200

SEATTLE, WA 98104

STEPHEN LLOYD JOHNSON PROGRAM DIRECTOR

PHONE (206) 323-5399 FAX (206) 342-9879

MAILING ADDRESS

815 S WELLER ST STE 200 SEATTLE, WA 98104

TREATMENT SERVICE **OUTPATIENT**

TREATMENT FOCUS AFRICAN-AMERICAN

17 1132 00 **COURT SERVICES INSTITUTE**

> 15715 - 206TH AVENUE S.E. RENTON, WA 98059

LORRAINE NELSON ADMINISTRATOR

PHONE

FAX

(425) 614-0428 866-268-7874 (425) 671-0908

MAILING ADDRESS

PO BOX 3550 RENTON, WA 98056

TREATMENT SERVICE

TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

17 1134 00 **DOC - BURIEN FIELD OFFICE**

> OCO/CD TREATMENT SERVICES 1511 - 8TH AVENUE S.W., #202

BURIEN, WA 98166

PATTY NOBLE

CDU PROGRAM ADMINISTRATOR

FAX

PHONE (360) 493-6469 (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS **OFFENDERS OFFENDERS**

17 0845 00

DOC - MADISON INN WORK RELEASE

OCO/CD TREATMENT SERVICES 102 - 21ST AVENUE EAST SEATTLE, WA 98112

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

LONG-TERM RESIDENTIAL

MISCELLANEOUS

ON-LINE REPORTING TREATMENT SERVICE

RECOVERY HOUSE

TREATMENT FOCUS

CORRECTIONAL 10 BEDS CORRECTIONAL 5 BEDS

17 0773 00

DOC - REYNOLDS WORK RELEASE

OCO/CD TREATMENT SERVICES 410 4TH AVENUE

SEATTLE, WA 98104

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

CORRECTIONAL CORRECTIONAL

17 0809 00

DOC - SEATTLE CRIMINAL JUSTICE CENTER

OCO/CD TREATMENT SERVICES 1550 - 4TH AVE. S.

SEATTLE, WA 98134

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

CORRECTIONAL CORRECTIONAL

17 0979 00 **DOWNTOWN EMERGENCY SERVICE CENTER (SEATTLE)**

CHEMICAL DEPENDENCY TREATMENT PROGRAM

507 THIRD AVENUE

SEATTLE, WA 98104-2304

WILLIAM G. HOBSON **EXECUTIVE DIRECTOR**

PHONE (206) 464-1570 FAX (206) 624-4196

MAILING ADDRESS

507 THIRD AVE

SEATTLE, WA 98104-2304

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

CHRONIC PUBLIC INEB. CHRONIC PUBLIC INEB.

17 1097 00 **EASTSIDE ADDICTION PROFESSIONALS**

1450 - 114TH AVENUE S.E., SUITE 100

BELLEVUE, WA 98004

LAURA HALFORD TURRA ADMINISTRATOR

PHONE (425) 462-8558 FAX (425) 688-1286

MAILING ADDRESS

1450 - 114TH AVENUE S.E., SUITE 100

BELLEVUE, WA 98004

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

ADULT & YOUTH

17 0040 00 **EASTSIDE RECOVERY CENTER - BELLEVUE**

(THERAPEUTIC HEALTH SERVICES-SUMMIT)

1412 140TH PLACE NE

BELLEVUE, WA 98007-3915

CAROL HOEFT **EXECUTIVE DIRECTOR**

PHONE TTY

(425) 747-7892

 FAX

(425) 747-8085 (425) 747-8348

MAILING ADDRESS

1412 140TH PLACE NE

BELLEVUE, WA 98007-3915

MISCELLANEOUS

PREGNANT & POST-PARTUM

CARF ACCREDITED

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

17 1165 00 **EMMANUEL COUNSELING AND EDUCATIONAL SERVICES**

12508 LAKE CITY WAY N.E., SUITE 220

SEATTLE, WA 98125

LENNY PADAYAO PROGRAM DIRECTOR

(206) 417-2222 PHONE

FAX

(206) 417-2231 (206) 417-2233

MAILING ADDRESS

12508 LAKE CITY WY NE STE 220

SEATTLE, WA 98125

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL FAITH-BASED **DUI ASSESSMENT** FAITH-BASED FAITH-BASED INTENSIVE OUTPATIENT

OUTPATIENT

17 0163 00 **EVERGREEN TREATMENT SERVICES - UNIT 1**

> 1700 AIRPORT WAY SOUTH RON JACKSON SEATTLE, WA 98134-1618 **EXECUTIVE DIRECTOR**

(206) 223-3644 PHONE FAX (206) 223-1482

MAILING ADDRESS

1700 AIRPORT WY S SEATTLE. WA 98134-1618

MISCELLANEOUS ON-LINE REPORTING

TREATMENT SERVICE

* OPIATE DEPENDENCY TREATMENT

* OUTPATIENT

TREATMENT FOCUS

FAITH-BASED

17 0163 01 **EVERGREEN TREATMENT SERVICES - UNIT 2**

BRANCH OF EVERGREEN TREATMENT SERVICES

1740 AIRPORT WAY SOUTH

RON JACKSON SEATTLE. WA 98134-1618 **EXECUTIVE DIRECTOR**

PHONE (206) 903-1898 UNIT 2 FAX (206) 223-1482

MAILING ADDRESS

1740 AIRPORT WAY S SEATTLE, WA 98134-1618

MISCELLANEOUS

PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT SERVICE

* OPIATE DEPENDENCY TREATMENT

* OUTPATIENT

TREATMENT FOCUS

ADULTS

ADULTS/DRUGS & PPW

17 1013 00 **EVERGREEN TREATMENT SERVICES - UNIT 3**

> MOBILE VAN PROGRAM ONE COMMUNITY LOCATION SEATTLE, WA 98134

RON JACKSON EXECUTIVE DIRECTOR

PHONE (206) 223-3644 (206) 223-1482 FAX

KING

MAILING ADDRESS

% 1700 AIRPORT WY S SEATTLE, WA 98134-1618

TREATMENT SERVICE

* OPIATE DEPENDENCY TREATMENT

TREATMENT FOCUS

ADULT

17 0370 00 EXODUS -- YOUTH

ECHO GLEN CHILDREN'S CENTER

33010 SE 99TH STREET SNOQUALMIE, WA 98065 CARLA BLAKE ADMINISTRATOR

PHONE (425) 831-2624 FAX (425) 831-1320

MAILING ADDRESS

33010 SE 99TH STREET SNOQUALMIE, WA 98065

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE INPATIENT INCARC YOUTH 16 BEDS

17 1182 00 FAIRFAX HOSPITAL ADDICTION RECOVERY TREATMENT SERVICES

10200 N.E. 132ND STREET RICHARD SIROTA

KIRKLAND, WA 98034 CHEMICAL DEP. PROGRAM MANAGER

PHONE (425) 821-2000 TTY (425) 821-2000 FAX (425) 821-9010

12 BEDS

PAULA F. FREDERICK

PROGRAM MANAGER

MAILING ADDRESS 10200 NE 132ND ST KIRKLAND, WA 98034

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

ACUTE DETOXIFICATION ADULTS & ADOLESCENTS 6 BEDS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
INTENSIVE INPATIENT

ADULTS & ADOLESCENTS
ADULTS & ADOLESCENTS
ADULTS & ADOLESCENTS

INTENSIVE OUTPATIENT ADULTS & ADOLESCENTS
OUTPATIENT ADULTS & ADOLESCENTS

SUB-ACUTE DETOXIFICATION ADULTS 6 BEDS

17 0409 01 FRIENDS OF YOUTH

ISSAQUAH YOUTH AND FAMILY PROGRAM 414 FRONT STREET NORTH

ISSAQUAH, WA 98052

PHONE (425) 392-6367 FAX (425) 391-4971

MAILING ADDRESS

PO BOX 12

ISSAQUAH, WA 98027

MISCELLANEOUS

YOUTH

DUI ASSESSMENT

* OUTPATIENT

TREATMENT FOCUS

CO-OCCURING YOUTH ONLY

17 0424 00 FUTURE VISIONS - AUBURN

620 "M" STREET NE, SUITE 2 AUBURN, WA 98002 MIKE FINNEGAN PROG. COORDINATOR

PHONE (253) 735-2718 FAX (253) 939-5792

MAILING ADDRESS

PO BOX 1737 AUBURN, WA 98071

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

17 0164 00 GENESIS HOUSE

621 - 34TH AVENUE JEFF BOTT

SEATTLE, WA 98122 EXECUTIVE DIRECTOR

PHONE (206) 328-0881 FAX (206) 323-5247

MAILING ADDRESS

PO BOX 22910 SEATTLE, WA 98122-0910

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* LONG-TERM RESIDENTIAL 34 BEDS

17 0042 03 GROUP HEALTH BHS - DETOX RESIDENTIAL UNIT

BRANCH AT REDMOND EASTSIDE GROUP HEALTH HOSPITAL 2700 152ND AVENUE N.E.

2700 152ND AVENUE N.E. REDMOND, WA 98052

PHONE (425) 883-5151 EXT. 4366

FAX (425) 556-6106

PATRICIA KENNEDY

MANAGER, DRU

MAILING ADDRESS

2700 152ND AVE NE EMB 2N DRU REDMOND, WA 98052

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE TREATMENT FOCUS

ACUTE DETOXIFICATION ADULT 5 BEDS INTENSIVE INPATIENT ADULT 8 BEDS

OUTPATIENT ADULT

17 0461 00 GUARDIAN RECOVERY PROGRAM

4812 AURORA AVE NORTH SEATTLE, WA 98103 LINDA WHITCOMB
EXECUTIVE DIRECTOR

PHONE (206) 545-0597

(206) 522-5856 24-HOUR #

MAILING ADDRESS

4812 AURORA AVE NORTH SEATTLE, WA 98103

TREATMENT SERVICE

DUI ASSESSMENT

OUTPATIENT

TREATMENT FOCUS

17 0988 00 HARBORVIEW MEDICAL CENTER ADDICTIONS PROGRAM

HARBORVIEW MENTAL HEALTH SERVICES, OUTPATIENT PROGRAMS

401 BROADWAY AVENUE SEATTLE, WA 98104 PAMELA G. HAITHCOX ADMINISTRATOR

PHONE (206) 744-9690 TTY (206) 744-9856 FAX (206) 744-9920

MAILING ADDRESS

C/O 325 9TH AVE MS: 359797 SEATTLE, WA 98104-2499

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER ADULT
DUI ASSESSMENT ADULT
* INTENSIVE OUTPATIENT ADULT
* OUTPATIENT ADULT

17 0753 00 HIGHLINE - WEST SEATTLE MENTAL HEALTH CENTER (BURIEN)

1010 SOUTH 146TH STREET SEATTLE, WA 98168 BETH HAMMONDS PROGRAM DIRECTOR

PHONE (206) 439-2550 FAX (206) 248-8232

MAILING ADDRESS

PO BOX 69080 SEATTLE, WA 98168

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT

* INTENSIVE OUTPATIENT CD & CODS
* OUTPATIENT CD & CODS

17 0054 00 HIGHLINE ADDICTION RECOVERY CENTER - TUKWILA

HIGHLINE MEDICAL CENTER 12844 MILITARY ROAD SOUTH

TUKWILA, WA 98168

MARK VARELA CLINICAL SUPERVISOR

PHONE (206) 242-2260 FAX (206) 248-4794

MAILING ADDRESS 12844 MILITARY RD S TUKWILA, WA 98168

JCAHO ACCREDITED

TREATMENT SERVICE

ACUTE DETOXIFICATION

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE INPATIENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADULT 6 BEDS

ADULT

17 0418 00 HOPE RECOVERY SERVICES - KENT

10830 S.E. KENT-KANGLEY RD., SUITE 102

KENT, WA 98031

ROBERT J.B. LATTIMAR

18 BEDS

DIRECTOR

PHONE (253) 520-7460 FAX (253) 520-3371

MAILING ADDRESS

10830 SE KENT-KANGLEY RD STE 102

KENT, WA 98031

TREATMENT FOCUS

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

17 0043 00

INTERCEPT ASSOCIATES

30620 PACIFIC HIGHWAY SOUTH, SUITE 107

FEDERAL WAY, WA 98003

NANCY STARK DIRECTOR

PHONE (253) 941-7555 FAX (253) 941-0652

MAILING ADDRESS

30620 PACIFIC HWY S STE 107 FEDERAL WAY, WA 98003

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

17 0167 00

KENT YOUTH AND FAMILY SERVICES

232 SOUTH 2ND AVENUE, SUITE 201

KENT, WA 98032

MIKE HEINISCH EXECUTIVE DIRECTOR

PHONE (253) 859-0300 FAX (253) 859-0745

MAILING ADDRESS

232 S 2ND AVE STE 201 KENT, WA 98032

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

YOUTH

17 0044 05 KING COUNTY ASSESSMENT CENTER

BRANCH OF KING CO. DIV. OF ALCOHOLISM & SUBSTANCE ABUSE SVCS

19600 INTERNATIONAL BLVD, SUITE 201

SEA TAC, WA 98188-5481

ROSE SOOHOO ADMINISTRATOR

PHONE (206) 296-7604 FAX (206) 296-0118

MAILING ADDRESS

19600 INTERNATIONAL BLVD STE 201 SEATAC, WA 98188-5481

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

17 0211 04 KING COUNTY DISTRICT COURT - KENT OFFICE

BRANCH OF KING COUNTY DISTRICT COURT

1210 SOUTH CENTRAL KENT, WA 98032 JUDY GARCIA ADMINISTRATOR

PHONE (206) 205-5387 FAX (206) 296-0588

MAILING ADDRESS

1210 S. CENTRAL KENT, WA 98032

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT

17 0211 00 KING COUNTY DISTRICT COURT - SEATTLE OFFICE

E-310 KING COUNTY COURTHOUSE

516 3RD AVENUE SEATTLE, WA 98104 JIM O'SHERSKY PROBATION OFFICER II

PHONE (206) 296-3599 FAX (206) 296-0596

MAILING ADDRESS

516 3RD AVE SEATTLE, WA 98104

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT

17 0211 07 KING COUNTY DISTRICT COURT - SHORELINE OFFICE

BRANCH OF KING COUNTY DISTRICT COURT

18050 MERIDIAN AVENUE NORTH

SEATTLE, WA 98133

NANCY THOMPSON PROBATION OFFICER II

PHONE (206) 296-3541 FAX (206) 296-0594

MAILING ADDRESS

18050 MERIDIAN AVE N SEATTLE, WA 98133

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT

17 0211 03 KING COUNTY DISTRICT COURT PROBATION - ISSAQUAH OFFICE

BRANCH OF KING COUNTY DISTRICT COURT

5415 220TH AVENUE S.E. ISSAQUAH, WA 98027 NANCY THOMPSON PROBATION OFFICER II

PHONE (206) 205-1736 FAX (206) 205-1729

MAILING ADDRESS

5415 220TH AVE SE ISSAQUAH, WA 98027

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT

17 0044 04 KING COUNTY EMERGENCY SERVICE PATROL

BRANCH OF KING COUNTY MHCADS

1930 BOREN AVENUE

SEATTLE, WA 98121

JAMES VOLLENDROFF

ASSIST. DIV. DIRECTOR/CD COORD

PHONE (206) 205-1076 FAX (206) 205-1102

MAILING ADDRESS

1930 BOREN AVE SEATTLE, WA 98121

TREATMENT SERVICE

* EMERGENCY SERVICE PATROL

TREATMENT FOCUS

17 0880 00 KOREAN COMMUNITY COUNSELING CENTER

302 NORTH 78TH STREET

SEATTLE, WA 98103

JEAN RHEE

EXECUTIVE DIRECTOR

PHONE (206) 784-5691 FAX (206) 784-4858

MAILING ADDRESS

302 N 78TH ST SEATTLE, WA 98103

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

KOREAN KOREAN KOREAN KOREAN

17 1245 00 LA ESPERANZA HEALTH COUNSELING SERVICES

916 NORTH 143RD STREET, SUITE A

SEATTLE, WA 98133

ZOILA SARITAMA ADMINISTRATOR

PHONE (206) 306-2690 FAX (206) 367-1296

MAILING ADDRESS

916 N 143RD ST STE A SEATTLE, WA 98133

MISCELLANEOUS

SPANISH

TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

17 0914 00 LAKESIDE-MILAM RECOVERY CENTER - EASTLAKE (SEATTLE)

BRANCH OF LAKESIDE-MILAM RECOVERY CENTERS, INC. 2815 EASTLAKE AVENUE EAST, SUITE 100

SEATTLE, WA 98102

LISA E. GRILLO ADMINISTRATOR

PHONE (206) 341-9373 FAX (206) 341-9917

MAILING ADDRESS

2815 EASTLAKE AVE E STE 100 SEATTLE, WA 98102

MISCELLANEOUS

CARF ACCREDITED ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

17 1221 00 LAKESIDE-MILAM RECOVERY CENTER (BELLEVUE)

LAKESIDE-MILAM RECOVERY CENTERS, INC. 275 - 118TH AVENUE S.E., SUITE 100

BELLEVUE, WA 98005

JOE WARD ADMINISTRATOR

PHONE (425) 452-8343 FAX (425) 454-0451

MAILING ADDRESS

275 118TH AVE SE STE 100 BELLEVUE, WA 98005

MISCELLANEOUS

CARF ACCREDITED

TREATMENT SERVICE
ALCOHOL & DRUG INFORMATION SCHOOL

ALCOHOL & DRUG INFORMATION SCHOO DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

17 0046 00 LAKESIDE-MILAM RECOVERY CENTER (KIRKLAND INPATIENT)

LAKESIDE-MILAM RECOVERY CENTERS, INC. 10322 NE 132ND ST

KIRKLAND, WA 98034-2829

JOANI SCHULZE ADMINISTRATOR

PHONE (425) 823-3116

(800) 231-4303 TOLL FREE

FAX (425) 823-3132

MAILING ADDRESS

10322 NE 132ND ST KIRKLAND, WA 98034-2829

MISCELLANEOUS

CARF ACCREDITED

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ACUTE DETOXIFICATION YOUTH ALSO 6 BEDS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE INPATIENT YOUTH ALSO 77 BEDS

INTENSIVE OUTPATIENT OUTPATIENT

17 0094 02 LAKESIDE-MILAM RECOVERY CENTER EAST (KIRKLAND)

BRANCH OF LAKESIDE-MILAM RECOVERY CENTERS, INC.

10422 NE 37TH CIRCLE, SUITE B

KIRKLAND, WA 98033

JULIE MITCHELL ADMINISTRATOR

PHONE (425) 822-5095 FAX (425) 828-0454

MAILING ADDRESS

10422 NE 37TH CIRCLE, SUITE B

KIRKLAND, WA 98033

MISCELLANEOUS

CARF ACCREDITED

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

17 0094 00 LAKESIDE-MILAM RECOVERY CENTER SOUTH (RENTON)

(FORMERLY LAKESIDE-MILAM - TUKWILA)

1000 SW 7TH STREET, SUITE A RENTON, WA 98055-1216 BARRY COONEY ADMINISTRATOR

PHONE (206) 248-4358 FAX (425) 430-9770

MAILING ADDRESS

1000 SW 7TH ST STE A RENTON, WA 98055-1216

MISCELLANEOUS

CARF ACCREDITED

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

17 0182 00 LAKESIDE-MILAM RECOVERY CENTERS, INC. - FEDERAL WAY

NINTH AVENUE CENTER BLDG. A 34004 - 9TH AVENUE SOUTH, SUITE 1A FEDERAL WAY, WA 98003-6737

RODNEY EHLI ADMINISTRATOR

PHONE (253) 942-8686 FAX (253) 838-7840

MAILING ADDRESS

34004 9TH AVE S STE 1A FEDERAL WAY, WA 98003-6737

MISCELLANEOUS

CARF ACCREDITED

YOUTH

ON-LINE REPORTING

TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT **OUTPATIENT**

17 0411 00 LAKESIDE-MILAM RECOVERY CENTERS, INC. - SEATTLE/AMBAUM

> (ADOLESCENT INPATIENT) 12845 AMBAUM BLVD. SW SEATTLE, WA 98146

J.P. LIDDLE **ADMINISTRATOR**

PHONE (206) 241-0890 (425) 823-3116

MAIN# DETOX

FAX (206) 241-0769

MAILING ADDRESS 12845 AMBAUM BLVD. SW SEATTLE, WA 98146

MISCELLANEOUS CARF ACCREDITED YOUTH

TREATMENT SERVICE TREATMENT FOCUS

ACUTE DETOXIFICATION 4 BEDS **DUI ASSESSMENT**

INTENSIVE INPATIENT YOUTH ALSO 43 BEDS

INTENSIVE OUTPATIENT

OUTPATIENT

SUB-ACUTE DETOXIFICATION 6 BEDS

17 0094 04 LAKESIDE-MILAM RECOVERY CENTERS, INC. (AUBURN)

RIVERBEND OFFICE BUILDING

721 N.E. 45TH ST. MONIQUE MCCOY-LEWIS AUBURN, WA 98002 **ADMINISTRATOR**

> PHONE (253) 735-5378 FAX (253) 735-5924

> > TREATMENT FOCUS

MAILING ADDRESS

721 NE 45TH ST AUBURN, WA 98002

MISCELLANEOUS

CARF ACCREDITED

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

17 0351 04 LAKESIDE-MILAM RECOVERY CENTERS, INC. (ISSAQUAH)

> LAKESIDE-MILAM RECOVERY CENTERS, INC. 98 N.E. GILMAN BLVD., SUITE 200

ISSAQUAH, WA 98027-2529

LISA LIERLEY **ADMINISTRATOR**

PHONE (425) 392-8468 FAX (425) 392-1792

MAILING ADDRESS

98 NE GILMAN BLVD STE 200 ISSAQUAH, WA 98027-2529

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

17 0431 00

MOTIVATIONS

17311 135TH AVENUE NE, SUITE C-400 WOODINVILLE, WA 98072

JAMES R. FOUTS ADMINISTRATOR

PHONE (425) 481-2112

MAILING ADDRESS

17311 135TH AVE NE STE C-400 WOODINVILLE, WA 98072

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

17 0229 00

MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM

17500 S.E. 392ND STREET AUBURN, WA 98092 NANCY MELLOR BEHAVIORAL HEALTH MANAGER

PHONE (253) 804-8752 FAX (253) 333-3615

MAILING ADDRESS

17500 SE 392ND ST AUBURN, WA 98092

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER
DUI ASSESSMENT
* INTENSIVE OUTPATIENT
* OUTPATIENT

TREATMENT FOCUS
NATIVE AMERICAN

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

17 0879 00

NATIONAL TRAFFIC SAFETY INSTITUTE (NTSI)

NATIONAL TRAINING SYSTEMS INSTITUTE DIV., NW REGIONAL OFFICE 15 - 1ST AVE NW ISSAQUAH, WA 98027

REGIONAL VICE PRESIDENT

GREG CUPPER

PHONE (425) 369-9000

1-800-776-6874 TOLL FREE

FAX (425) 369-8111

MAILING ADDRESS

PO BOX 2308 ISSAQUAH, WA 98027

TREATMENT SERVICE

TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL ADULT

59

17 1088 00 **NEWLIFE FAMILY SERVICES**

> CHRISTIAN COUNSELING CENTER 33919 NINTH AVENUE SOUTH, SUITE 3

FEDERAL WAY, WA 98003

REV. LEE YOUNG DIRECTOR

FAX

PHONE (253) 223-3149

(253) 874-1411 (253) 874-1411

MAILING ADDRESS

33919 NINTH AVE S STE 3 FEDERAL WAY, WA 98003

MISCELLANEOUS

YOUTH

TREATMENT FOCUS

KOREAN AND ASIAN KOREAN AND ASIAN KOREAN AND ASIAN

KOREAN AND ASIAN

DUI ASSESSMENT INTENSIVE OUTPATIENT

TREATMENT SERVICE

OUTPATIENT

17 1260 00

NORTHSHORE STARS PROGRAM

ALCOHOL & DRUG INFORMATION SCHOOL

CENTER FOR HUMAN SERVICES 18315 BOTHELL WAY N.E. BOTHELL, WA 98011

RAMONA GRAHAM PROGRAM MANAGER

PHONE (425) 489-6028 FAX (425) 489-6029

MAILING ADDRESS

C/O 17018 15TH AVE NE SHORELINE, WA 98155

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

ADULTS YOUTH YOUTH YOUTH YOUTH

17 1180 00

NORTHSHORE YOUTH AND FAMILY SERVICES

10309 N.E. 185TH ST. BOTHELL, WA 98011

ROBERT AKERS **ADMINISTRATOR**

PHONE (425) 485-6541 (425) 485-4154 FAX

MAILING ADDRESS

10309 NE 185TH ST BOTHELL, WA 98011

TREATMENT SERVICE

TREATMENT FOCUS

OUTPATIENT YOUTH 17 0039 00 NORTHWEST RESOURCES II, INC. - DES MOINES

22620 7TH AVE SOUTH

DES MOINES, WA 98198-6821

CINDY BROWN ADMINISTRATOR

PHONE (206) 824-9273 FAX (206) 878-8309

MAILING ADDRESS

22620 7TH AVE S

DES MOINES, WA 98198-6821

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

17 1073 00 PACIFIC NORTHWEST TREATMENT SERVICES, LLC

1050 140TH AVENUE N.E., SUITE G

BELLEVUE, WA 98005

GLEN MERRIWETHER **ADMINISTRATOR**

(425) 641-1999 PHONE FAX (425) 641-4069

MAILING ADDRESS

1050 140TH AVE NE STE G BELLEVUE, WA 98005

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

17 0044 06 PERINATAL TREATMENT SERVICES -- SEATTLE

600 NORTH 130TH STREET

SEATTLE, WA 98133

KAY E. SEIM

EXECUTIVE DIRECTOR

PHONE (206) 223-1300 FAX (206) 223-1279

MAILING ADDRESS

600 N 130TH ST SEATTLE, WA 98133

MISCELLANEOUS

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING TREATMENT SERVICE

* INTENSIVE INPATIENT

* LONG-TERM RESIDENTIAL

TREATMENT FOCUS

WOMEN WITH CHILDREN 2 BEDS WOMEN WITH CHILDREN 24 BEDS

* OUTPATIENT

17 0965 00

PIONEER COUNSELING SERVICES (ADULT)

BRANCH OF PIONEER HUMAN SERVICES 105 - 14TH AVENUE, SUITE 3A

SEATTLE, WA 98122

BARBARA WEISS, MA ADMINISTRATOR

PHONE (206) 464-1684

FAX (206) 405-4150

KING

MAILING ADDRESS

105 14TH AVE STE 3A SEATTLE, WA 98122-5569

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADULT ADULT ADULT ADULT

17 0752 00 PIONEER COUNSELING SERVICES (YOUTH & FAMILY)

BRANCH OF PIONEER HUMAN SERVICES

105 - 14TH AVENUE, SUITE 3-B

SEATTLE, WA 98122

JUDY HOLMAN

DIRECTOR OF MH PROGRAMS

PHONE (206) 464-1684 FAX (206) 405-4150

MAILING ADDRESS

105 14TH AVE STE 3B SEATTLE, WA 98122

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT INTENSIVE OUTPATIENT

OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

YOUTH AND FAMILY YOUTH AND FAMILY

YOUTH AND FAMILY

YOUTH AND FAMILY

17 1208 00 PRAXIS, INC. - BELLEVUE

1800 - 112TH AVENUE N.E., SUITE 260-E

BELLEVUE, WA 98004

JOHN O'MALLEY **ADMINISTRATOR**

PHONE (425) 454-9490

FAX (425) 454-9495

MAILING ADDRESS

1800 112TH AVE NE STE 260-E

BELLEVUE, WA 98004

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

17 0192 00

PRAXIS, INC. - SEATTLE

1319 DEXTER AVENUE NORTH, SUITE 340

SEATTLE, WA 98109

RONALD FIELD **ADMINISTRATOR**

PHONE (206) 286-9494

FAX (206) 286-9499

MAILING ADDRESS

PO BOX 19474

SEATTLE, WA 98109-1474

TREATMENT SERVICE ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

62

17 0916 00 PROFESSIONAL HEALTH ASSOCIATES EAST (BELLEVUE)

BRANCH OF PROFESSIONAL HEALTH ASSOCIATES, INC.

13353 BEL-RED RD STE 204 BELLEVUE, WA 98005 TAMARA GRIFFIN EXECUTIVE DIRECTOR

PHONE (425) 747-4248 FAX (425) 649-2039

MAILING ADDRESS

13353 BEL-RED RD STE 204 BELLEVUE, WA 98005

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

ADULT/YOUTH

ADULT/YOUTH

ADULT/YOUTH

17 0821 00 PROFESSIONAL HEALTH ASSOCIATES, INC. (SEATTLE)

MAIN FACILITY

610 NW 44TH STREET SEATTLE, WA 98107

TAMARA GRIFFIN EXECUTIVE DIRECTOR

PHONE (206) 784-4646 FAX (206) 784-5222

MAILING ADDRESS

610 NW 44TH ST SEATTLE, WA 98107

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH

17 1236 00 PROGRAMA S.E.R. (BURIEN)

445 1/2 S.W. 152ND ST. BURIEN, WA 98166 MIGUEL OROZCO-DELGADO

ADMINISTRATOR

PHONE (206) 293-2957 (206) 387-1240

FAX (425) 277-0258

MAILING ADDRESS

102 N 51ST ST SEATTLE, WA 98103

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

ADULT LATINO ADULT LATINO ADULT LATINO ADULT LATINO 17 0959 00 PROGRAMA S.E.R. (RENTON)

SOLE PROPRIETORSHIP UNDER MIGUEL OROZCO-DELGADO

918 SOUTH 2ND STREET

RENTON, WA 98055

MIGUEL OROZCO-DELGADO, CDC

PROGRAM DIRECTOR

PHONE (206) 387-1240 FAX (425) 277-0258

MAILING ADDRESS

PO BOX 891

RENTON, WA 98057

MISCELLANEOUS

SPANISH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

HISP./LATINO ADULTS HISP./LATINO ADULTS

HISP./LATINO ADULTS

HISP./LATINO ADULTS

17 1242 00 **QUANTAH ASSESSMENT AND COUNSELING - EASTSIDE**

16770 N.E. 79TH STREET, #103

REDMOND, WA 98052

TIM MCCAULEY **ADMINISTRATOR**

PHONE

FAX

(425) 497-9042 (425) 497-9716

MAILING ADDRESS 16770 NE 79TH ST #103 REDMOND, WA 98052

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

QUANTAH ASSESSMENT AND COUNSELING SERVICES 17 1138 00

8420 DAYTON AVE. NORTH

SEATTLE, WA 98103

TIMOTHY MCCAULEY

DIRECTOR

FAX

(206) 920-6264 PHONE

> (206) 570-5476 (206) 542-8460

MAILING ADDRESS

PO BOX 60115

SHORELINE, WA 98160

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DULASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

17 1135 00 **RAGING RIVER RECOVERY CENTER**

> SNOQUALMIE INDIAN TRIBE 31500 ENTWHISTLE ST.

CARNATION, WA 98014

MATT MATTSON TRIBAL ADMINISTRATOR

PHONE FAX

(425) 333-5425 (425) 333-5428 MAILING ADDRESS

PO BOX 280

CARNATION, WA 98014-0280

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

TRIBAL MEMBERS

TRIBAL MEMBERS TRIBAL MEMBERS

17 1099 00 **RAINIER COUNSELING**

847 BLAKE STREET

ENUMCLAW, WA 98022

MIRANDA WEAVER **ADMINISTRATOR**

PHONE TTY

(360) 802-0446 1-800-833-6384

FAX (360) 802-0449

MAILING ADDRESS

847 BLAKE ST

ENUMCLAW, WA 98022

TREATMENT SERVICE

DUI ASSESSMENT

TREATMENT FOCUS

ADULTS

ADULTS ADULTS ADULTS

INTENSIVE OUTPATIENT

OUTPATIENT

17 0059 00 **RECOVERY CENTERS OF KING COUNTY - KENT BRANCH**

ALCOHOL & DRUG INFORMATION SCHOOL

505 WASHINGTON AVENUE SOUTH

KENT, WA 98032-5709

PHONE (253) 854-6513 (253) 854-6521 FAX

PATRICIA C. KNOX, PH.D.

ADMINISTRATOR

MAILING ADDRESS

505 WASHINGTON AVE S KENT, WA 98032-5709

MISCELLANEOUS

PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

17 0035 00 **RECOVERY CENTERS OF KING COUNTY - MAIN FACILITY**

464 12TH AVENUE, SUITE 300

SEATTLE, WA 98122

PATRICIA KNOX, PH.D. ADMINISTRATOR

PHONE (206) 322-2970 FAX

(206) 324-8915

MAILING ADDRESS

464 - 12TH AVE STE 300

SEATTLE, WA 98122

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

17 0831 00 RECOVERY CENTERS OF KING COUNTY - SEATTLE DETOX/INPATIENT CENTER

BRANCH FACILITY

1701 - 18TH AVENUE SOUTH SEATTLE, WA 98144-4317 PATRICIA C. KNOX, PH.D. ADMINISTRATOR

PHONE (206) 325-5000 FAX (206) 325-3377

MAILING ADDRESS

1701 18TH AVE S

SEATTLE, WA 98144-4317

MISCELLANEOUS

YOUTH

TREATMENT SERVICE TREATMENT FOCUS

* ACUTE DETOXIFICATION ADULT & YOUTH 36 BEDS * ADATSA ASSESSMENT CENTER ADULT

* INTENSIVE INPATIENT 32 BEDS

17 0843 00 RECOVERY OPTIONS NORTHWEST INC. - SEATTLE

2150 N 107TH STREET SUITE 200 R. EDEN DEUTSCH, PH.D. SEATTLE, WA 98133-9009 ADMINISTRATOR

PHONE (206) 361-4707 FAX (206) 365-0926

MAILING ADDRESS

2150 N 107TH ST, SUITE 200 SEATTLE, WA 98133-9009

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
INTENSIVE OUTPATIENT
OUTPATIENT
ADULT
ADULT

17 0171 00 RENTON AREA YOUTH AND FAMILY SERVICES

1025 SOUTH THIRD RICHARD BROOKS
RENTON, WA 98055 EXECUTIVE DIRECTOR

PHONE (425) 271-5600 FAX (253) 229-8926

MAILING ADDRESS

1025 SOUTH THIRD RENTON, WA 98055

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS
OUTPATIENT PRIMARILY YOUTH

17 0052 00 RESIDENCE XII - KIRKLAND (FORMERLY KENMORE/BOTHELL)

12029 - 113TH AVENUE NE KIRKLAND, WA 98034 SHARON CHAMBERS EXECUTIVE DIRECTOR

PHONE (425) 823-8844 FAX (425) 820-2371

MAILING ADDRESS

12029 113TH AVE NE KIRKLAND, WA 98034

MISCELLANEOUS

CARF ACCREDITED ON-LINE REPORTING

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE INPATIENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

WOMEN ONLY 25 BEDS

17 0487 00 RUTH DYKEMAN YOUTH & FAMILY SERVICES

RUTH DYKEMAN CHILDREN'S CENTER

15001 8TH AVE S.W. SEATTLE, WA 98166 THOMAS E. REMBIESA EXECUTIVE DIRECTOR

PHONE (206) 243-5544 TTY (206) 243-5544 FAX (206) 243-0757

MAILING ADDRESS

P. O. BOX 66086 SEATTLE, WA 98166

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE OUTPATIENT YOUTH ONLY
* OUTPATIENT YOUTH ONLY

17 0055 00 RYTHER CHILD CENTER - MAIN FACILITY

2400 N.E. 95TH STREET LEE E. GROGG

SEATTLE, WA 98115-2499 EXECUTIVE DIRECTOR/CEO

PHONE (206) 525-5050 FAX (206) 525-9795

MAILING ADDRESS

2400 NE 95TH ST

SEATTLE, WA 98115-2499

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS
ALCOHOL & DRUG INFORMATION SCHOOL AGES 13-17

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE INPATIENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

AGES 15-17
MALE YOUTH ONLY
12 BEDS
AGES 13-17

AGES 13-17

17 1026 00 RYTHER CHILD CENTER - WEST SEATTLE OUTPATIENT BRANCH

1725 SOUTHWEST ROXBURY STREET

SEATTLE, WA 98106

TIM BURDICK PROGRAM DIRECTOR

PHONE (206) 766-9789

FAX

(206) 525-5050 (206) 766-9790

MAILING ADDRESS C/O 2400 NE 95TH ST SEATTLE, WA 98115

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE OUTPATIENT YOUTH
* OUTPATIENT YOUTH

17 0055 01 SAFECO SAFEHOUSE BRANCH (GIRLS ADOLESCENT PROGRAM)

BRANCH OF RYTHER CHILD CENTER

11729-1/2 - 36TH AVENUE N.E.

SEATTLE, WA 98125

ROGER IINO

FAX

ASSOCIATE DIRECTOR

PHONE (206) 525-5050

(206) 517-0207 (206) 525-9795

MAILING ADDRESS

% 2400 NE 95TH ST SEATTLE, WA 98115

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE INPATIENT YOUTH ONLY 11 BEDS

17 0058 00 SCHICK SHADEL HOSPITAL

12101 AMBAUM BOULEVARD SW SEATTLE, WA 98146-2699 TOM BULLEN ADMINISTRATOR

PHONE (206) 244-8100 FAX (206) 431-9142

MAILING ADDRESS

12101 AMBAUM BLVD SW SEATTLE, WA 98146-2699

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE TREATMENT FOCUS

ACUTE DETOXIFICATION AVERSION THERAPY DUI ASSESSMENT SCHICK PTS ONLY

INTENSIVE INPATIENT AVERSION THERAPY 36 BEDS

17 0836 00 SEA MAR COMMUNITY HEALTH CENTERS - DES MOINES

BRANCH OF SEA MAR COMMUNITY HEALTH CENTER

24215 PACIFIC HIGHWAY SOUTH DES MOINES, WA 98198-4097

MAGDALENA HERRERA DELEON PROGRAM DIRECTOR

12 BEDS

PHONE (206) 878-7393 FAX (206) 870-7397 MAILING ADDRESS

24215 PACIFIC HWY S

DES MOINES, WA 98198-4097

MISCELLANEOUS

SPANISH

TREATMENT SERVICE

* INTENSIVE INPATIENT **ADULT** 9 BEDS * LONG-TERM RESIDENTIAL **ADULT** 31 BEDS * RECOVERY HOUSE ADULT 10 BEDS

17 1213 00

SEA MAR RENACER YOUTH TREATMENT CENTER

BRANCH OF SEA MAR COMMUNITY HEALTH CENTERS

10001 17TH PLACE SOUTH SEATTLE, WA 98168

GEORGE CALDERON **ADMINISTRATOR**

PHONE (206) 766-6960 FAX (206) 764-0494

MAILING ADDRESS

10001 17TH PL S SEATTLE, WA 98168

MISCELLANEOUS

JCAHO ACCREDITED

YOUTH

TREATMENT SERVICE

DUI ASSESSMENT

INTENSIVE INPATIENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

TREATMENT FOCUS

HASAP

MULTICULTURAL YOUTH 24 BEDS

HASAP HASAP

17 0172 00

SEADRUNAR - FOREST PARK

SEATTLE DRUG AND NARCOTIC CENTER

10344 - 14TH AVENUE SOUTH

SEATTLE, WA 98108

NAN BUSBY

EXECUTIVE DIRECTOR

PHONE (206) 767-0244 FAX (206) 767-5964

MAILING ADDRESS

PO BOX 80864

SEATTLE, WA 98108

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* LONG-TERM RESIDENTIAL * RECOVERY HOUSE

110 BEDS

5 BEDS

17 1152 00

SEATTLE COUNSELING SERVICE FOR SEXUAL MINORITIES

1216 PINE STREET, SUITE 300

SEATTLE, WA 98101

ANN MCGETTIGAN **EXECUTIVE DIRECTOR**

PHONE (206) 323-1768

TTY (206) 323-1768 FAX (206) 323-2184

MAILING ADDRESS

1216 PINE ST STE 300 SEATTLE, WA 98101

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

SEXUAL MINORITIES SEXUAL MINORITIES SEXUAL MINORITIES SEXUAL MINORITIES **SEXUAL MINORITIES**

17 0057 00

SEATTLE INDIAN HEALTH BOARD

2212 S. JACKSON SEATTLE, WA 98122 AL SWEETEN ADMINISTRATOR

PHONE (206) 324-9360 FAX

(206) 324-8910

EXT 201

MAILING ADDRESS

PO BOX 3364 SEATTLE, WA 98114

MISCELLANEOUS

PREGNANT & POST-PARTUM NATIVE AMERICAN ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN

17 1183 00

SEATTLE MENTAL HEALTH-BELLEVUE

14216 N.E. 21ST STREET BELLEVUE, WA 98007

TRISH BLANCHARD, MED CHIEF CLINICAL OFFICER

PHONE (206) 302-2200 FAX (206) 302-2210

MAILING ADDRESS

1600 E OLIVE ST SEATTLE, WA 98122

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

CO-OCC CO-OCC

17 1059 00

SEATTLE MENTAL HEALTH-CAPITOL HILL

1600 EAST OLIVE STREET SEATTLE, WA 98122

TRISH BLANCHARD, MED. CHIEF CLINICAL OFFICER

(206) 302-2200 PHONE TTY (206) 324-6115 FAX (206) 302-2210

MAILING ADDRESS

1600 E OLIVE ST SEATTLE, WA 98122

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DULASSESSMENT**

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

CO-OCC DISORDER CO-OCC DISORDER CO-OCC DISORDER CO-OCC DISORDER

17 1066 00 **SEATTLE MENTAL HEALTH-NCI AUBURN**

1314 - 8TH STREET N.E., SUITE 103

AUBURN, WA 98002

TRISH BLANCHARD, MED CHIEF CLINICAL OFFICER

(206) 302-2200 PHONE FAX (206) 302-2210

MAILING ADDRESS

1600 E OLIVE ST SEATTLE, WA 98122

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* OUTPATIENT

TREATMENT FOCUS

CO-OCC DISORDER

CO-OCC DISORDER

SEATTLE MENTAL HEALTH-NCI KENT/SCS KENT 17 1063 00

1404 SOUTH CENTRAL AVENUE, SUITE 113

SEATTLE, WA 98032

TRISH BLANCHARD, MED CHIEF CLINICAL OFFICER

PHONE (206) 302-2200 (206) 302-2210 FAX

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SEATTLE, WA 98122

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DUI ASSESSMENT

* OUTPATIENT

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17 1065 00 **SEATTLE MENTAL HEALTH-NCI NORTHGATE**

9706 - 4TH AVENUE N.E., SUITE 303

SEATTLE, WA 98115

TRISH BLANCHARD, MED CHIEF CLINICAL OFFICER

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MAILING ADDRESS

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CO-OCC DISORDER

17 1061 00 SEATTLE MENTAL HEALTH-NCI RENTON

3900 EAST VALLEY ROAD, SUITE 205

RENTON, WA 98055

TRISH BLANCHARD, MED CHIEF CLINICAL OFFICER

PHONE (206) 302-2200 (206) 302-2210

FAX

KING

MAILING ADDRESS

1600 E OLIVE ST SEATTLE, WA 98122

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17 1064 00 SEATTLE MENTAL HEALTH-SERVICE CENTER AUBURN

810 - 28TH N.E.

TRISH BLANCHARD, MED CHIEF CLINICAL OFFICER AUBURN, WA 98002

PHONE (206) 302-2200

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1600 E OLIVE ST RENTON, WA 98122

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17 1062 00 SEATTLE MENTAL HEALTH-SERVICE CENTER TUKWILA

6100 SOUTHCENTER BOULEVARD, 2ND FLOOR

TUKWILA, WA 98188-2441

TRISH BLANCHARD, MED CHIEF CLINICAL OFFICER

(206) 444-7800 PHONE

(206) 302-2200

TTY (205) 302-2206 (206) 444-7810 FAX

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17 1223 00 SEATTLE-KING COUNTY PUBLIC HEALTH - KCCF KING CO CORRECTIONAL FAC

JODET - JAIL-BASED OPIOID DEPENDENCY ENGAGEMENT & TREATMENT PROG

500 5TH AVENUE #6-WEST

SEATTLE, WA 98104

MARK ALSTEAD PROGRAM MANAGER

PHONE (206) 296-1778

 FAX

(206) 296-1771

MAILING ADDRESS

500 5TH AVE #6-WEST

SEATTLE, WA 98104

TREATMENT SERVICE

* OPIATE DEPENDENCY TREATMENT

TREATMENT FOCUS

17 1222 00 SEATTLE-KING COUNTY PUBLIC HEALTH - REGIONAL JUSTICE CENTER (RJC)

JODET - JAIL-BASED OPIOID DEPENDENCY ENGAGEMENT & TREATMENT PROG

620 WEST JAMES STREET KENT, WA 98031-2312

MARK ALSTEAD PROGRAM MANAGER

PHONE (206) 296-1788 FAX (206) 205-2439

MAILING ADDRESS

620 W JAMES ST KENT, WA 98031-2312

TREATMENT SERVICE

TREATMENT FOCUS

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17 0097 00 SHAMROCK GROUP, INC.

8535 PHINNEY AVENUE NORTH SEATTLE, WA 98103

PATRICIA BRESLIN ADMINISTRATOR

PHONE (206) 789-4784 (206) 789-4786 FAX

MAILING ADDRESS

8535 PHINNEY AVENUE NORTH SEATTLE, WA 98103

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS

17 0928 00 SPECTRUM COUNSELING AND ASSESSMENT SERVICES, INC.

19655 1ST AVENUE SOUTH, SUITE 206

LINDA FELTON NORMANDY PARK, WA 98148 **EXECUTIVE DIRECTOR**

> PHONE (253) 804-6929 (206) 824-4186

MAILING ADDRESS

PO BOX 3421

FEDERAL WAY, WA 98063-3421

MISCELLANEOUS

PREGNANT & POST-PARTUM

TREATMENT SERVICE

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DUI ASSESSMENT

TREATMENT FOCUS WOMEN & MINORITIES **WOMEN & MINORITIES**

SQUARE ONE - REDMOND 17 0060 01

7811 - 159TH PLACE NORTHEAST REDMOND, WA 98052

DON THOMAS **ADMINISTRATOR**

PHONE (425) 881-7084 FAX (425) 869-0967

MAILING ADDRESS 7811 - 159TH PL NE

REDMOND, WA 98052

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS

17 0061 00 **SUNRISE CENTERS**

> GOOD HELP NW, INC. 12650 FIRST AVENUE SOUTH SEATTLE, WA 98168

MIKE SEDWICK

ADMINISTRATOR/OWNER

PHONE (206) 248-3006 (206) 248-3029 FAX

MAILING ADDRESS

12650 FIRST AVE S SEATTLE, WA 98168

TREATMENT SERVICE

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TREATMENT FOCUS

17 0449 01

SWEDISH MEDICAL CENTER - BALLARD COMMUNITY HOSPITAL

ADDICTION RECOVERY SERVICES 5300 TALLMAN AVENUE NORTHWEST SEATTLE, WA 98107

GARY MCCULLOUGH PROGRAM MANAGER

PHONE (206) 781-6209 FAX (206) 781-6183

MAILING ADDRESS 5300 TALLMAN AVE NW SEATTLE, WA 98107

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TREATMENT SERVICE

TREATMENT FOCUS ACUTE DETOXIFICATION

DUI ASSESSMENT INTENSIVE INPATIENT

INTENSIVE OUTPATIENT

OUTPATIENT

15 BEDS

15 BEDS

THE LIVING CENTER - SHORELINE 17 0990 00

> 19940 BALLINGER WAY N.E. #B1 SHORELINE, WA 98155

LEE JAMISON, CDC **EXECUTIVE DIRECTOR**

PHONE (206) 363-1992 FAX (206) 362-7475

MAILING ADDRESS

P.O. BOX 65124 SHORELINE, WA 98155

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS

ADULT **ADULT**

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17 0158 01 THERAPEUTIC HEALTH SERVICES - MIDVALE BRANCH (NORTH)

BRANCH OF THERAPEUTIC HEALTH SERVICES 17962 MIDVALE AVENUE NORTH, SUITE 150

SEATTLE, WA 98133

ELLIS MCDANIEL BRANCH MANAGER

PHONE (206) 546-9766 FAX (206) 542-0326

MAILING ADDRESS

17962 MIDVALE AVE N STE 150 SHORELINE, WA 98133

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- * OUTPATIENT

17 0835 00 THERAPEUTIC HEALTH SERVICES - RAINIER BRANCH (SOUTH)

BRANCH OF THERAPEUTIC HEALTH SERVICES 5802 RAINIER AVENUE SOUTH SEATTLE, WA 98118

GEORGE E. PARKER **BRANCH ADMINISTRATOR**

PHONE (206) 723-1980 FAX (206) 721-3930

MAILING ADDRESS 5802 RAINIER AVE SO SEATTLE, WA 98118

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* OUTPATIENT

TREATMENT FOCUS AFRICAN-AMERICAN AFRICAN-AMERICAN AFRICAN-AMERICAN AFRICAN-AMERICAN AFRICAN-AMERICAN

17 1044 00 THERAPEUTIC HEALTH SERVICES - SENECA BRANCH

1305 SENECA STREET SEATTLE, WA 98101

VICTORIA EVANS BRANCH MANAGER

(206) 323-0934 PHONE (206) 323-0933 FAX

MAILING ADDRESS

% 1116 SUMMIT AVE SEATTLE, WA 98101

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CARF ACCREDITED

TREATMENT SERVICE * OPIATE DEPENDENCY TREATMENT TREATMENT FOCUS **OPIATE DEPEND**

17 0158 00 THERAPEUTIC HEALTH SERVICES - SUMMIT BRANCH

BRANCH OF THERAPEUTIC HEALTH SERVICES 1116 SUMMIT AVENUE

SEATTLE, WA 98101

VICTORIA EVANS BRANCH MANAGER

PHONE (206) 323-0930 FAX (206) 323-0933

MAILING ADDRESS

1116 SUMMIT AVE SEATTLE, WA 98101

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- * OUTPATIENT

TREATMENT FOCUS

17 0057 01 THUNDERBIRD TREATMENT CENTER

BRANCH OF SEATTLE INDIAN HEALTH BOARD 9236 RENTON AVENUE SOUTH SEATTLE, WA 98118

AL SWEETEN ADMINISTRATOR

PHONE (206) 722-7152 (206) 722-0830 FAX

MAILING ADDRESS

PO BOX 3364 SEATTLE, WA 98114

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- * INTENSIVE INPATIENT * LONG-TERM RESIDENTIAL
- * RECOVERY HOUSE

TREATMENT FOCUS

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NATIVE AMERIC. ADULT 55 BEDS NATIVE AMERIC. ADULT 8 BEDS NATIVE AMERIC. ADULT 28 BEDS

17 1170 00 **UGM RIVERTON PLACE**

3020 SOUTH 128TH STREET SEATTLE, WA 98168

LARRY JOSLIN DIRECTOR

PHONE (206) 242-5585 (206) 439-8936 FAX

MAILING ADDRESS

3020 S 128TH ST SEATTLE, WA 98168

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

FAITH-BASED FAITH-BASED FAITH-BASED 17 0241 02 UNITED INDIANS OF ALL TRIBES FOUNDATION

ADOLESCENT SUBSTANCE ABUSE TREATMENT PROGRAM

1945 YALE PLACE EAST

SEATTLE, WA 98102

JOHN LAWSON

CD CLINICAL SUPERVISOR

PHONE (206) 325-0070 FAX (206) 781-7239

MAILING ADDRESS

1945 YALE PLACE E SEATTLE, WA 98102

MISCELLANEOUS

NATIVE AMERICAN

YOUTH

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

YOUTH NATIVE AMER. YOUTH NATIVE AMER.

17 0241 01 UNITED INDIANS OF ALL TRIBES FOUNDATIONS

DIVISION OF CHILDREN, YOUTH, AND FAMILY SERVICES

1945 YALE PLACE EAST SEATTLE. WA 98102 ROXANNE ROOS FINNEY PROGRAM DIRECTOR

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MAILING ADDRESS

1945 YALE PLACE E SEATTLE, WA 98102

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

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* OUTPATIENT NATIVE AMERICAN

17 1127 00 UNITED TREATMENT AND THERAPY

A COMPANY OF EWR, INC.

12501 BEL RED ROAD, SUITE 206

BELLEVUE, WA 98005

WILLIAM E. SWAILES ADMINISTRATOR

PHONE (425) 688-0033

FAX (425) 688-0030

MAILING ADDRESS

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INTENSIVE OUTPATIENT

PO BOX 1525

OUTPATIENT

BELLEVUE, WA 98009-1525

TREATMENT FOCUS

DUI OFFENDERS

YOUTH

YOUTH

17 1009 00 UNIVERSITY OF WASHINGTON, DEPARTMENT OF PSYCHIATRY

PRIME TIME PROGRAM

146 NORTH CANAL STREET, SUITE 100

SEATTLE, WA 98103

ERIC TRUPIN DIRECTOR

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FAX

(206) 685-3430

KING

17 0911 00

MAILING ADDRESS

146 N CANAL ST, STE 100 SEATTLE, WA 98103

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YOUTH

TREATMENT SERVICE

OUTPATIENT MICA YOUTH

VALLEY CITIES COUNSELING & CONSULTATION - AUBURN

BRANCH OF VALLEY CITIES COUNSELING & CONSULTATION

2704 "I" STREET NORTHEAST

AUBURN, WA 98002

MARILYN LASALLE

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TTY

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AUBURN, WA 98002

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17 0909 00

VALLEY CITIES COUNSELING & CONSULTATION - FEDERAL WAY NORTH

33301 - 1ST WAY SOUTH, SUITE C-115

FEDERAL WAY, WA 98003

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TTY FAX (253) 735-3354

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17 0910 00

VALLEY CITIES COUNSELING & CONSULTATION - KENT

BRANCH OF VALLEY CITIES COUNSELING & CONSULTATION

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KENT, WA 98032

STACEY DEVENNEY CD SERVICES DIRECTOR

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VETERANS ADMINISTRATION PUGET SOUND HEALTH CARE SYSTEM-SEATTLE 17 0064 00

> ADDICTIONS TREATMENT CENTER 1660 SOUTH COLUMBIAN WAY

SEATTLE, WA 98108

ANDREW J. SAXON, M.D.

DIRECTOR

PHONE (206) 764-2123 SEATTLE

FAX (206) 764-2209

MAILING ADDRESS

1660 S COLUMBIAN WY SEATTLE, WA 98108-1597

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GENERAL POPULATION

ALSO, DUAL DISORDERS

30 BEDS

17 0783 00 WASHINGTON ASIAN/PACIFIC ISLANDER FAMILIES

> AGAINST SUBSTANCE ABUSE (WAPIFASA) 606 MAYNARD AVENUE SOUTH, SUITE 106

SEATTLE, WA 98104

ANITA HIDALGO PROGRAM DIRECTOR

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SEATTLE, WA 98104

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* OUTPATIENT

ASIAN PAC ISLANDER

17 1032 00 WCHS, INC. (RENTON CLINIC)

CRC HEALTH CORPORATION 2838 N.E. SUNSET BLVD.

RENTON, WA 98056

MICHELLE BURKE

BRANCH PROGRAM DIRECTOR

PHONE

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FAX

(425) 687-7352

MAILING ADDRESS

2838 NE SUNSET BLVD

RENTON, WA 98056

TREATMENT SERVICE

TREATMENT FOCUS

OPIATE DEPENDENCY TREATMENT **OPIATE ADDICTION** 17 0997 00 WESTERN WASHINGTON ALCOHOL CENTER - AUBURN

BRANCH OF WESTERN WASHINGTON ALCOHOL CENTER, INC.

4210 AUBURN WAY N, SUITE 2

AUBURN, WA 98002

GLENN THOMAS **EXECUTIVE DIRECTOR**

PHONE (253) 813-2011 FAX (253) 536-1255

MAILING ADDRESS

4210 AUBURN WAY N, SUITE 2

AUBURN, WA 98002

TREATMENT SERVICE TREATMENT FOCUS **ADULTS**

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

ADULTS

ADULTS

ADULTS

17 0955 00 **WESTERN WASHINGTON ALCOHOL CENTER - RENTON**

BRANCH OF WESTERN WASHINGTON ALCOHOL CENTER, INC.

140 RAINIER AVENUE SOUTH, SUITE 5

RENTON, WA 98055

GLENN THOMAS EXECUTIVE DIRECTOR

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(425) 271-0181 FAX (425) 271-8866

MAILING ADDRESS 140 RAINIER AVE S STE 5

RENTON, WA 98055

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **ADULT DUI ASSESSMENT** ADULT INTENSIVE OUTPATIENT **ADULT** OUTPATIENT **ADULT**

17 0440 00 **WOMEN'S RECOVERY CENTER**

4649 SUNNYSIDE AVENUE N, SUITE 200

SEATTLE, WA 98103

CATHERINE TRESTRAIL ADMINISTRATOR

PHONE (206) 547-1955

MAILING ADDRESS

4649 SUNNYSIDE AVE N, STE 200

SEATTLE, WA 98103

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DUI ASSESSMENT WOMEN ONLY INTENSIVE OUTPATIENT WOMEN ONLY OUTPATIENT WOMEN ONLY

YOUTH EASTSIDE SERVICES - BELLEVUE MAIN FACILITY 17 0065 00

999 164TH AVENUE N.E.

BELLEVUE, WA 98008-3518

PATTY SKELTON

C.E.O.

PHONE (425) 747-4YES (425) 957-0351 FAX

MAILING ADDRESS

999 164TH AVE NE

BELLEVUE, WA 98008-3518

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17 0065 01

YOUTH EASTSIDE SERVICES - LAKE WASHINGTON BRANCH

BRANCH OF YOUTH EASTSIDE SERVICES

13009 85TH

KIRKLAND, WA 98033

PATTI SKELTON

C.E.O.

PHONE (425) 747-4YES

MAILING ADDRESS

13009 85TH

KIRKLAND, WA 98033

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KITSAP

18 1277 00

A NEW BEGINNING WITH ADVANTAGES - PORT ORCHARD

1703 S.E. SEDGEWICK ROAD, SUITE 113

PORT ORCHARD, WA 98366

KAREN BENOIT **ADMINISTRATOR**

PHONE (360) 874-7558 (360) 874-7603

FAX

MAILING ADDRESS 19950-7TH AVE NE, #201

POULSBO, WA 98310

TREATMENT SERVICE

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18 1045 00

A NEW BEGINNING WITH ADVANTAGES - POULSBO

19950 7TH AVENUE N.E., SUITE 201

POULSBO, WA 98370

KAREN BENOIT ADMINISTRATOR

PHONE (360) 598-3929

FAX (360) 598-4114

MAILING ADDRESS

19950 7TH AVE STE 201

POULSBO, WA 98370

TREATMENT SERVICE

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18 1190 00 ACTION

ACTION ASSOCIATION

729 PROSPECT STREET, SUITE 200 PORT ORCHARD, WA 98366 BETTY KASSUHN ADMINISTRATOR

FAX

PHONE (360) 895-1307

(360) 649-7646 (360) 895-4805

MAILING ADDRESS

729 PROSPECT ST STE 200 PORT ORCHARD, WA 98366

TREATMENT FOCUS

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18 0221 00

ADVANTAGES COUNSELING SERVICES - BREMERTON

800 - 11TH STREET BREMERTON, WA 98337 RUBEN ROMERO ADMINISTRATOR

PHONE (360) 479-0853 FAX (360) 479-0217

MAILING ADDRESS

800 11TH ST

BREMERTON, WA 98337

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SPANISH

TREATMENT SERVICE

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18 0273 00

AGAPE

5464 KITSAP WAY BREMERTON, WA 98312 BARBARA DAY-MAX EXECUTIVE DIRECTOR

PHONE (360) 373-1529 FAX (360) 373-4051

MAILING ADDRESS

5464 KITSAP WAY BREMERTON, WA 98312

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NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN 18 0475 01 **CASCADE RECOVERY CENTER - SILVERDALE**

9095 MCCONNELL AVENUE N.W.

SILVERDALE, WA 98383

RICK BIALOCK ADMINISTRATOR

FAX

PHONE (360) 698-7267

(360) 698-5967

MAILING ADDRESS

PO BOX 3452

SILVERDALE, WA 98383

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PREGNANT & POST-PARTUM

YOUTH

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YOUTH & ADULT

CASCADE RECOVERY CENTER-NORTH 18 0475 00

174 FRONT STREET

POULSBO, WA 98383

RICK BIALOCK **EXECUTIVE DIRECTOR**

PHONE (360) 697-7721 FAX (360) 697-7737

MAILING ADDRESS

PO BOX 3452

SILVERDALE, WA 98383

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

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OUTPATIENT

CASCADIA ADDICTION TREATMENT SERVICES 18 1186 00

2817 WHEATON WAY, SUITE 205

BREMERTON, WA 98310

LINDA MCGOWAN-ANDERSON

ADMINISTRATOR

PHONE (360) 373-0155

 FAX

(360) 373-0258

MAILING ADDRESS

2817 WHEATON WY STE 205 BREMERTON, WA 98310

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL ADULTS **DUI ASSESSMENT** ADULTS INTENSIVE OUTPATIENT **ADULTS** OUTPATIENT **ADULTS**

DOC - BREMERTON FIELD OFFICE 18 1178 00

OCO/CD TREATMENT SERVICES

5002 KITSAP WAY

BREMERTON, WA 98312

PATTY NOBLE

CD PROGRAM ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

KITSAP

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

TREATMENT SERVICE

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OUTPATIENT

TREATMENT FOCUS

CORRECTIONS CORRECTIONS

18 0865 00

DOC - PENINSULA WORK RELEASE

OCO/CD TREATMENT SERVICES 1340 LLOYD PARK WAY

PORT ORCHARD, WA 98366

PATTY NOBLE

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FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

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TREATMENT FOCUS

CORRECTIONAL CORRECTIONAL

18 0214 00

KITSAP COUNTY DISTRICT COURT PROBATION SVCS DEPT.

614 DIVISION STREET, MAIL STOP 39

PORT ORCHARD, WA 98366

DAYLE S. CRANE

ADMINISTRATOR

PHONE FAX

(360) 337-7010 (360) 337-7267

MAILING ADDRESS

614 DIVISION ST MS: 39 PORT ORCHARD, WA 98366

TREATMENT SERVICE
DUI ASSESSMENT

TREATMENT FOCUS

18 0184 00

KITSAP MENTAL HEALTH SERVICES

5455 ALMIRA DRIVE NE

BREMERTON, WA 98311

CHERYL MOGENSEN

CO-OCCURING PROG COORDINATOR

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TTY FAX

(360) 478-2715 (360) 377-0458

MAILING ADDRESS

5455 ALMIRA DRIVE NE BREMERTON, WA 98311

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YOUTH

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* OUTPATIENT

CO-OCCURING

18 0067 00 KITSAP RECOVERY CENTER

1975 NE FUSON ROAD

BREMERTON, WA 98311

LISA ROMWALL

TREATMENT DIRECTOR

PHONE (360) 337-4625 FAX (360) 377-7027

MAILING ADDRESS

1975 NE FUSON RD BREMERTON, WA 98311

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT FOCUS

(ACCEPTS TANF)

COD-MHC (& TANF)

(ACCEPTS TANF)

(ACCEPTS TANF)

(ACCEPTS TANF) 6 BEDS

TREATMENT SERVICE * ADATSA ASSESSMENT CENTER

* INTENSIVE INPATIENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

* SUB-ACUTE DETOXIFICATION

NAVAL HOSPITAL

SUBSTANCE ABUSE REHABILITATION PROGRAM

BUILDING 491, TOP FLOOR BREMERTON, WA 98314-5001

KENNETH L. STEPHENS, JR. PROGRAM DIRECTOR

37 BEDS

PHONE (360) 476-2594

MAILING ADDRESS

BLDG 491 TOP FLR

BREMERTON, WA 98314-5001

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

18 0070 00

18 0069 00

OLALLA GUEST LODGE

OLALLA RECOVERY CENTERS 12851 LALA COVE LANE SE OLALLA, WA 98359

KEVIN MERRICK GENERAL MANAGER

PHONE (253) 857-6201 FAX (253) 857-3993

MAILING ADDRESS

12851 LALA COVE LN SE OLALLA, WA 98359

MISCELLANEOUS

CARF ACCREDITED

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE * INTENSIVE INPATIENT

47 BEDS

18 0515 00 OLYMPIC ESD 114 RECOVERY PROGRAM

105 NATIONAL AVENUE NORTH BREMERTON, WA 98310

KRISTIN SCHUTTE TREATMENT DIRECTOR

FAX

PHONE (360) 405-5833

(360) 405-5837 CL SUP

DIRECTOR

(360) 478-6869

MAILING ADDRESS

105 NATIONAL AVE N BREMERTON, WA 98310

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* OUTPATIENT ADOLESCENTS

18 0888 00 PORT GAMBLE S'KLALLAM RECOVERY CENTER

7550 LITTLE BOSTON ROAD NORTHEAST

KINGSTON, WA 98346

DAN BREWER
PROGRAM COORDINATOR

PHONE (360) 297-9673 FAX (360) 297-9678

MAILING ADDRESS

31912 LITTLE BOSTON RD NE KINGSTON, WA 98346

MISCELLANEOUS

NATIVE AMERICAN ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS NATIVE AMERICAN

NATIVE AMERICAN & GENERAL

18 1109 00 SUQUAMISH TRIBE WELLNESS PROGRAM

SUQUAMISH TRIBAL COUNCIL 18513 AUGUSTA AVENUE SUQUAMISH, WA 98392

CHARLES WAGNER ADMINISTRATOR

PHONE (360) 394-5200 FAX (360) 598-1724

MAILING ADDRESS

PO BOX 1228

SUQUAMISH, WA 98392

MISCELLANEOUS

NATIVE AMERICAN ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN 18 0429 00 THE RIGHT CHOICE COUNSELING SERVICE, INC.

1740 NE RIDDELL RD, SUITE 314 BREMERTON, WA 98310

VICKI JOHNSTONE ADMINISTRATOR

FAX

PHONE (360) 373-4077

(360) 792-0362

MAILING ADDRESS

OUTPATIENT

1740 NE RIDDELL RD, SUITE 314 BREMERTON, WA 98310

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT TREATMENT FOCUS

18 0066 00

WEST SOUND TREATMENT CENTER - FULLER WISE BLDG

1415 LUMSDEN ROAD PORT ORCHARD, WA 98367

EXECUTIVE DIRECTOR

JOHN WISE

PHONE (360) 876-9430 FAX (360) 876-0713

MAILING ADDRESS

1415 LUMSDEN RD PORT ORCHARD, WA 98367

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

KITTITAS

19 1053 00

ALCOHOL DRUG DEPENDENCY SERVICE - CLE ELUM ADDS

117 EAST FIRST STREET CLE ELUM, WA 98922 SKIP MYNAR DIRECTOR

PHONE (509) 674-2146 FAX (509) 674-0667

MAILING ADDRESS

117 E FIRST ST CLE ELUM, WA 98922

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

19 0071 00 ALCOHOL DRUG DEPENDENCY SERVICE - ELLENSBURG ADDS

MAIN FACILITY

507 NANUM STREET, ROOM 111 ELLENSBURG, WA 98926

SKIP MYNAR DIRECTOR

PHONE (509) 925-9821

> 1-800-925-3454 **TOLL FREE**

(509) 963-3941 FAX

MAILING ADDRESS

507 NANUM ST RM 111 ELLENSBURG, WA 98926

MISCELLANEOUS

PREGNANT & POST-PARTUM YOUTH ON-LINE REPORTING

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

19 1162 00

CASCADE RECOVERY RESOURCE CENTER

707 NORTH PEARL STREET, SUITE D ELLENSBURG, WA 98926

PAM STONEBURG **ADMINISTRATOR**

PHONE (509) 933-3838 FAX (509) 933-4044

MAILING ADDRESS

PO BOX 817

ELLENSBURG, WA 98926

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

19 0502 00

KITTITAS VALLEY RECOVERY SERVICES

103 E. 4TH, SUITE 204, DAVIDSON BUILDING ELLENSBURG, WA 98926

BRUCE FISHER, ESQ. ADMINISTRATOR

PHONE (509) 925-7227 (509) 925-7117 FAX

MAILING ADDRESS

103 E 4TH STE 204 ELLENSBURG, WA 98926

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

19 0422 00 PARKE CREEK CHEMICAL DEPENDENCY PROGRAM

JUVENILE REHABILITATION ADMINISTRATION / DSHS

11042 PARKE CREEK ROAD ELLENSBURG, WA 98926

STEPHEN CORDERO GROUP HOME SUPERVISOR

PHONE (509) 968-3924 FAX (509) 963-3933

MAILING ADDRESS

11042 PARKE CREEK RD ELLENSBURG, WA 98926

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE INPATIENT YOUTH 19 BEDS

KLICKITAT

DEPENDENCY HEALTH SERVICES - GOLDENDALE 20 1158 00

BRANCH OF CENTRAL WASHINGTON COMPRHENSIVE MENTAL HEALTH

112 WEST MAIN ST.

GOLDENDALE, WA 98620

MICHAEL CUNNINGHAM

DIRECTOR

PHONE (509) 773-5801 FAX (509) 773-6513

MAILING ADDRESS

112 W MAIN ST

GOLDENDALE, WA 98620

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

CO-OCCURING * OUTPATIENT **CO-OCCURING**

DEPENDENCY HEALTH SERVICES - WHITE SALMON 20 1159 00

BRANCH OF CENTRAL WASHINGTON COMPREHENSIVE MENTAL HEALTH

251 RHINE VILLAGE DR. WHITE SALMON, WA 98672 MICHAEL CUNNINGHAM

DIRECTOR

PHONE (509) 493-3400 FAX (509) 493-4961

MAILING ADDRESS

C/O 112 W MAIN STREET GOLDENDALE, WA 98620

TREATMENT SERVICE

TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

LEWIS

21 0354 00 ADDICTIONS RECOVERY CENTER - CHEHALIS

PROVIDENCE CENTRALIA HOSPITAL 500 SE WASHINGTON STREET CHEHALIS, WA 98532

DEE DE MOHAN, R.N. PROGRAM DIRECTOR

PHONE (360) 748-4357

(360) 740-6520

FAX (360) 740-8367

MAILING ADDRESS

PO BOX 1507 CHEHALIS, WA 98532

MISCELLANEOUS

JCAHO ACCREDITED PREGNANT & POST-PARTUM YOUTH ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ACUTE DETOXIFICATION

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE INPATIENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

20 BEDS

21 0881 00 ADDICTIONS RECOVERY CENTER - MORTON BRANCH

BRANCH OF PROVIDENCE CENTRALIA HOSPITAL 218 A MAIN STREET

218 A MAIN STREET MORTON, WA 98356 DEE DE MOHAN PROGRAM MANAGER

PHONE (360) 496-6216 FAX (360) 496-6232

MAILING ADDRESS

PO BOX 1507 CHEHALIS, WA 98532

MISCELLANEOUS

JCAHO ACCREDITED ON-LINE REPORTING

TREATMENT SERVICE

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT ADULT ADULT

21 0074 00 CASCADE MENTAL HEALTH CARE

(FORMERLY LEWIS COUNTY MENTAL HEALTH) 135 WEST MAIN CHEHALIS, WA 98532

H. SUE KILLILLAY EXECUTIVE DIRECTOR

PHONE (360) 748-6696 FAX (360) 748-0627

MAILING ADDRESS

PO BOX 1445 CHEHALIS, WA 98532 TREATMENT SERVICE

DUI ASSESSMENT OUTPATIENT

TREATMENT FOCUS

ADULT JAIL

21 0540 00 **EUGENIA CENTER**

> 121 N.W. CHEHALIS AVENUE CHEHALIS, WA 98532

CHARLENE FISHER PRESIDENT/DIRECTOR

PHONE (360) 740-9767 FAX (360) 740-5484

MAILING ADDRESS

PO BOX 1371 CHEHALIS, WA 98532

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT * INTENSIVE OUTPATIENT

* OUTPATIENT

ADULT YOUTH YOUTH

GREEN HILL SCHOOL (SAGE DRUG/ALCOHOL UNIT) 21 0572 00

SPRUCE LIVING UNIT

375 S.W. 11TH STREET, MAILSTOP S21-5

CHEHALIS, WA 98532

A. JOEL MORLIN

SAGE PROGRAM MANAGER

PHONE (360) 740-3419 FAX (360) 740-3421

MAILING ADDRESS

375 SW 11TH ST, MS: S21-5 CHEHALIS, WA 98532

MISCELLANEOUS

YOUTH

TREATMENT FOCUS INCARC MALE YOUTH INCARC MALE YOUTH

TREATMENT SERVICE INTENSIVE OUTPATIENT

OUTPATIENT

21 1227 00 **LEWIS COUNTY SOCIAL SERVICES**

28 S.W. CHEHALIS AVENUE

CHEHALIS, WA 98532

HOLLI SPANSKI

SOCIAL SERVICES MANAGER

(360) 740-1449 PHONE FAX (360) 740-2775

MAILING ADDRESS

28 SW CHEHALIS AVE CHEHALIS, WA 98532

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

OFFENDERS OFFENDERS

LEWIS

21 0425 00 MAPLE LANE SCHOOL (COLUMBIA LIVING UNIT)

OMNI INPATIENT PROGRAM 20311 OLD HWY 9 SW (MS B21-7) CENTRALIA, WA 98531-9688

LOUISE HICKS DIRECTOR

PHONE (360) 736-1361 297

MAILING ADDRESS

TREATMENT SERVICE

INTENSIVE INPATIENT

20311 OLD HWY 9 SW (MS B21-7) CENTRALIA, WA 98531-9688

TREATMENT FOCUS

YOUTH 32 BEDS

21 0576 00 NEW DIRECTIONS COUNSELING - CENTRALIA

1000 KRESKY PLAZA, SUITE G CENTRALIA. WA 98531 FRED R. DICKINSON ADMINISTRATOR/OWNER

PHONE (360) 330-5012 FAX (360) 330-5017

MAILING ADDRESS

1000 KRESKY PLAZA STE G CENTRALIA, WA 98531

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

21 1051 00 NEW DIRECTIONS COUNSELING - MOSSY ROCK

224 EAST STATE STREET MOSSY ROCK, WA 98564 FRED DICKINSON ADMINISTRATOR

PHONE (360) 330-5012 TTY 1-800-833-6388 FAX (360) 330-5017

MAILING ADDRESS 1000 KRESKY, SUITE C

CENTRALIA, WA 98531

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

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ALSO HISPANIC

ALSO HISPANIC

ALSO HISPANIC

21 0549 00 THE RIGHT STEP, INC. - LEWIS COUNTY

BRANCH OF THE RIGHT STEP, INC. (FORMERLY BOB BRENT & ASSOC)

118 NORTH MARKET BOULEVARD CHEHALIS, WA 98532

ADMINISTRATOR

INGRID KAIL

PHONE (360) 748-7268 FAX (360) 740-9787

MAILING ADDRESS

PO BOX 1423 CHEHALIS, WA 98532

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT 21 1018 00 TRUE NORTH - ESD 113 - LEWIS

EDUCATIONAL SERVICE DISTRICT 113 - BRANCH

2100 N. NATIONAL AVENUE #15

CHEHALIS, WA 98532

ROB VINCENT SAP DIRECTOR

PHONE (360) 464-6870 HDQTRS

(360) 464-6872 LEAD COUNS

(360) 748-2274 AT SCHOOL

FAX (360) 464-6906

FAX

MAILING ADDRESS 601 MCPHEE RD SW OLYMPIA, WA 98502-5080

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

YOUTH YOUTH

LINCOLN

22 0076 00 LINCOLN COUNTY ALCOHOL & DRUG CENTER

510 MORGAN STREET DAVENPORT, WA 99122 DAN PITMAN DIRECTOR

PHONE (509) 725-2111 FAX (509) 725-2141

MAILING ADDRESS

PO BOX 152

DAVENPORT, WA 99122-0152

MISCELLANEOUS

PREGNANT & POST-PARTUM YOUTH ON-LINE REPORTING

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER
ALCOHOL & DRUG INFORMATION SCHOOL
DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

MASON

23 0730 00 BHR RECOVERY SERVICES-SHELTON

BEHAVIORAL HEALTH RESOURCES 110 WEST "K" STREET

SHELTON, WA 98584

CARL FLOWERS
PROGRAM DIRECTOR

PHONE (360) 426-1696 SHELTON

(360) 704-7170 OLYMPIA

MAILING ADDRESS

% 3857 MARTIN WY E OLYMPIA, WA 98506-5268

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

LOW INCOME/ADULT LOW INCOME/ADULT

DOC - MISSION CREEK CORRECTIONS CENTER FOR WOMEN 23 1250 00

> OCO/CD TREATMENT SERVICES 3420 N.E. SAND HILL ROAD

BELFAIR, WA 98528

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 277-2400 (360) 277-2454 FAX

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

TREATMENT SERVICE

TREATMENT FOCUS CORRECTIONS

INTENSIVE OUTPATIENT

DOC - WASHINGTON CORRECTIONS CENTER FOR MEN - SHELTON 23 0777 00

> OCO/CD TREATMENT SERVICES W. 2321 DAYTON AIRPORT ROAD

SHELTON, WA 98584

PATTY NOBLE CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

FRED R. DICKINSON

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS INTENSIVE OUTPATIENT CORRECTIONAL/MEN OUTPATIENT CORRECTIONS/MEN

NEW DIRECTIONS COUNSELING - SHELTON 23 0514 01

627 WEST FRANKLIN STREET

SHELTON, WA 98584

ADMINISTRATOR

PHONE (360) 427-5232 FAX (360) 427-5006

MAILING ADDRESS

PO BOX 906

SHELTON, WA 98584

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

AGE 17+ & SPANISH SP ADULTS/ADOLESCENTS ADULTS/ADOLESCENTS ADULTS/ADOLESCENTS

23 0374 00 NORTHWEST INDIAN TREATMENT CENTER - SHELTON OUTPATIENT SERVICES

SQUAXIN ISLAND TRIBE 3760 S.E. OLD OLYMPIC HWY SHELTON, WA 98584

JUNE O'BRIEN DIRECTOR

PHONE (360) 426-1582 OP SHELTON

(360) 482-2674 **RES ELMA**

(360) 427-1951 FAX

MAILING ADDRESS

3760 SE OLD OLYMPIA HWY SHELTON, WA 98584

MISCELLANEOUS

CARF ACCREDITED

YOUTH

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

NAT AMERICAN ADULT NAT AMER ADULT/YOUTH NAT AMER ADULT/YOUTH

NAT AMER ADULT/YOUTH

23 1015 00 **NORTHWEST RESOURCES II, INC. - SHELTON**

428 WEST BIRCH, SUITE 14B

SHELTON, WA 98584

CINDY BROWN ADMINISTRATOR

PHONE (360) 426-0890 (360) 426-4688

FAX

MAILING ADDRESS

428 W BIRCH STE 14B SHELTON, WA 98584

TREATMENT SERVICE

DUI ASSESSMENT

TREATMENT FOCUS

ADULT ADULT **ADULT**

INTENSIVE OUTPATIENT OUTPATIENT

ADULT

SKOKOMISH H.O.P.E. ALCOHOL & DRUG PROGRAM 23 0485 00

ALCOHOL & DRUG INFORMATION SCHOOL

NORTH 80 TRIBAL CENTER ROAD

SHELTON, WA 98584

CARLOS ARROYO PROGRAM DIRECTOR

PHONE (360) 426-7788

(360) 426-4232 TRIBAL CTR

FAX (360) 877-5943

N 80 TRIBAL CENTER RD SHELTON, WA 98584

MISCELLANEOUS

MAILING ADDRESS

NATIVE AMERICAN

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER **DUI ASSESSMENT**

* OUTPATIENT

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN 23 0920 00 ST. PETER CHEMICAL DEPENDENCY CENTER - BELFAIR

BRANCH OF PROVIDENCE ST. PETER CHEMICAL DEPENDENCY CENTER

24070 HIGHWAY #3, SUITE "A"

BELFAIR, WA 98528

MIKE KERLIN PROGRAM DIRECTOR

PHONE (360) 277-0523

> 1-800-332-0465 **TOLL FREE**

(360) 493-7739 TTY FAX (360) 432-9902

MAILING ADDRESS

% 4800 COLLEGE ST SE LACEY, WA 98503

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER **ADULT**

ADULT/ADOLESCENT DUI ASSESSMENT

* INTENSIVE OUTPATIENT **ADULT** * OUTPATIENT **ADULT**

23 0919 00 ST. PETER CHEMICAL DEPENDENCY CENTER - SHELTON

BRANCH OF PROVIDENCE ST. PETER CHEMICAL DEPENDENCY CENTER

506 WEST FRANKLIN MIKE KERLIN

SHELTON, WA 98584 PROGRAM DIRECTOR

> PHONE (360) 432-8692

TOLL FREE 1-800-332-0465

TTY (360) 493-7739 FAX (360) 432-9902

MAILING ADDRESS

% 4800 COLLEGE ST SE LACEY, WA 98503

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER **DUI ASSESSMENT**

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT & YOUTH ADULT & ADOLESCENT **ADULT & YOUTH ADULT & YOUTH**

23 1058 00 TRUE NORTH - ESD 113 - MASON

EDUCATIONAL SERVICE DISTRICT 113 - BRANCH

807 WEST PINE ST.

SHELTON, WA 98584

ROB VINCENT SAP DIRECTOR

(360) 464-6870 PHONE

(360) 464-6872 LEAD COUNS

HDQTRS

(360) 427-2050 SCHOOL#

FAX

(360) 464-6906

MAILING ADDRESS

% 601 MCPHEE RD SW OLYMPIA, WA 98502-5080

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

YOUTH YOUTH

OKANOGAN

24 0079 00 COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM

CONFEDERATED TRIBES OF THE COLVILLE RESERVATION

COLVILLE TRIBAL HEADQUARTERS

NESPELEM, WA 99155

ROBERTA HANSEN ADMINISTRATOR

PHONE (509) 634-2600

(509) 634-2610

1-800-573-9343 TOLL FREE

FAX (509) 634-2607

MAILING ADDRESS

PO BOX 150

NESPELEM, WA 99155

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

NATIVE AMERICAN

24 1267 00 COLVILLE TRIBAL ALCOHOL/DRUG PROGRAM - OMAK

CONFEDERATED TRIBES OF THE COLVILLE RESERVATION

500 BENTON STREET OMAK, WA 98841 ROBERTA HANSEN ADMINISTRATOR

DIVINION

PHONE

(509) 422-7410 800-573-9343

FAX (509) 422-7436

MAILING ADDRESS

PO BOX 150

NESPELEM, WA 98841

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

24 0078 00 OKANOGAN BEHAVIORAL HEALTHCARE, INC.

307 SOUTH MAIN

OMAK, WA 98841

MIKE ARRINGTON ADMINISTRATOR

PHONE

FAX

(509) 826-5600 (509) 826-3648

MAILING ADDRESS

PO BOX 3208

OMAK, WA 98841

MISCELLANEOUS

PREGNANT & POST-PARTUM

SPANISH

YOUTH

ON-LINE REPORTING

OKANOGAN

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

ADULT & YOUTH

SPANISH SPEAKING

PACIFIC

25 0859 00 ADDICTIONS RECOVERY CENTER - LONG BEACH BRANCH

PROVIDENCE CENTRALIA HOSPITAL

103 EAST SIXTH

LONG BEACH, WA 98631

DEE DE MOHAN ADMINISTRATOR

PHONE (360) 642-5059

> 1-800-622-4009 **TOLL FREE**

(360) 740-6520

FAX (360) 642-5049

MAILING ADDRESS

% PO BOX 1507 CHEHALIS, WA 98532

MISCELLANEOUS

JCAHO ACCREDITED

YOUTH

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT ADULT ADULT

ADULT & YOUTH ADULT & YOUTH

25 0858 00 **ADDICTIONS RECOVERY CENTER - SOUTH BEND**

PROVIDENCE CENTRALIA HOSPITAL 914-B W ROBERT BUSH DRIVE SOUTH BEND, WA 98586

DEE DE MOHAN PROGRAM MANAGER

PHONE (360) 875-4172

1-800-622-4009 **TOLL FRE**

FAX (360) 875-4174

MAILING ADDRESS

% PO BOX 1507

CHEHALIS, WA 98532

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

25 0520 00 NASELLE YOUTH CAMP (CORRECTIONS/YOUTH ONLY)

> "BRIDGE" PROGRAM - DSHS/JRA 11 YOUTH CAMP LANE (MS: B25-2)

NASELLE, WA 98638-8600

SPENCER MOOERS ADMINISTRATOR

PHONE (360) 484-3223

MAILING ADDRESS

11 YOUTH CAMP LN (MS: B25-2) NASELLE, WA 98638-8600

MISCELLANEOUS

YOUTH

TREATMENT SERVICE INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS YOUTH/CORRECTIONAL YOUTH/CORRECTIONAL

25 1123 00 **SHOALWATER BAY INDIAN TRIBE**

4168 STREET ROAD 105 SOUTH

TOKELAND, WA 98590

GARY HILL CD PROGRAM ADMINISTRATOR

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26 1173 00 **KALISPEL SOCIAL SERVICES - USK**

> KALISPEL TRIBE OF INDIANS 48641 - SR 20

USK, WA 99119

ROBERT RUSSELL

SOCIAL SERVICES DIRECTOR

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27 0941 00 A AVENUE OF RECOVERY

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DANIEL BISSONNETTE, MBA, MAC

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27 1133 00 A-1 SOLUTIONS COUNSELING SERVICE - TACOMA

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MYRTLE VAUGHN DIRECTOR

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27 1192 00

ALCOHOL DRUG SERVICES OF WASHINGTON - PUYALLUP

10312 120TH STREET EAST, SUITE 3 $\,$

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THERON MORGAN

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27 1171 00

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PUYALLUP TRIBAL HEALTH AUTHORITY 5625 - 52ND STREET EAST PUYALLUP, WA 98371

JODY BROOKS ADMINISTRATOR

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> 3513 PORTLAND AVENUE TACOMA, WA 98404

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CROSSROADS TREATMENT CENTER - PACIFIC AVENUE 27 0998 00

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27 0085 00 **CROSSROADS TREATMENT CENTER - TACOMA**

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5915 ORCHARD STREET WEST, BUILDING B

DAVID LARSEN TACOMA, WA 98467 EXECUTIVE DIRECTOR

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DOC - WASHINGTON CORRECTIONS CENTER FOR WOMEN (PURDY)

OCO/CD TREATMENT SERVICES 9601 BUJACICH ROAD NORTHWEST

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27 1017 00

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BRANCH OF OLALLA RECOVERY CENTERS

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TACOMA, WA 98402

EDDIE GRIFFIN OWNER/DIRECTOR

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27 0413 00 HORIZON TREATMENT SERVICES (UNIVERSITY PLACE)

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IN TOUCH COUNSELING AND ASSESSMENT 27 1122 00

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27 0351 03 LAKESIDE-MILAM RECOVERY CENTERS, INC. (PUYALLUP)

10217 - 125TH STREET COURT EAST, SUITE 100

PUYALLUP, WA 98374-2717

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ARMY SUBSTANCE ABUSE PROGRAM 2ND AND LIGGETT, BLDG 2006 TACOMA, WA 98431-5000

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27 0190 04

MOMS & WOMEN'S RECOVERY CENTER - EAST PUYALLUP BRANCH

BRANCH OF TACOMA/PIERCE COUNTY HEALTH DEPT.

719 EAST MAIN AVENUE PUYALLUP, WA 98408 DAVE BISCHOF CLINIC MANAGER

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27 0190 03

MOMS & WOMEN'S RECOVERY CENTER - SOUTH (PARKLAND) BRANCH

BRANCH OF TACOMA/PIERCE COUNTY HLTH DEPT (FORMERLY OF SPANAWAY)

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MOMS & WOMEN'S RECOVERY CENTER - TACOMA BRANCH

BRANCH OF TACOMA/PIERCE COUNTY HEALTH DEPT.

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27 0907 00 PERINATAL TREATMENT SERVICES - PIERCE COUNTY BRANCH

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KAY E. SEIM

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27 1124 00 PERINATAL TREATMENT SVCS - PIERCE COUNTY ADOLESCENT FRESH START

4810 SOUTH WILKESON

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27 0191 00 PIERCE COUNTY ALLIANCE

TACOMA OUTPATIENT TR/ADATSA 510 TACOMA AVENUE SOUTH TACOMA, WA 98402-5416

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27 1008 00

PIERCE COUNTY ALLIANCE - BREAKING THE CYCLE ALTERNATIVES CENTER

BRANCH OF PIERCE COUNTY ALLIANCE

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MAILING ADDRESS 510 TACOMA AVE S TACOMA, WA 98402-5416

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27 0191 01

PIERCE COUNTY ALLIANCE - YOUTH OUTPATIENT PROGRAM

BRANCH OF PIERCE COUNTY ALLIANCE

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27 0216 00

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PATTY ROADHOUSE

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TREATMENT SERVICE DUI ASSESSMENT TREATMENT FOCUS

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27 1140 00 **PIONEER ADULT COUNSELING - TACOMA**

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758 ST. HELENS AVE TACOMA, WA 98402

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

CO-OCCURING CO-OCCURING CO-OCCURING CO-OCCURING

27 0534 00 PROSPERITY COUNSELING & TREATMENT SERVICES, INC.

> 1723 BONNEY AVENUE. SUITE A DAVID W. LAWS SUMNER, WA 98390 **ADMINISTRATOR**

> > PHONE (253) 863-9667 FAX (253) 863-0023

MAILING ADDRESS

PO BOX 1888 SUMNER, WA 98390

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE INPATIENT ADULT WOMEN 53 BEDS * LONG-TERM RESIDENTIAL 2 BEDS * RECOVERY HOUSE ADULT WOMEN 5 BEDS

27 1037 00 PROSPERITY WELLNESS CENTER

> 5001 - 112TH STREET EAST DAVID W. LAWS TACOMA, WA 98446 **ADMINISTRATOR**

(253) 531-2103 PHONE (253) 531-2104

FAX (253) 531-2007 **MAILING ADDRESS**

% PO BOX 1888 SUMNER, WA 98390

MISCELLANEOUS

PREGNANT & POST-PARTUM

TREATMENT SERVICE TREATMENT FOCUS

12 BEDS INTENSIVE INPATIENT LONG-TERM RESIDENTIAL 12 BEDS **RECOVERY HOUSE** 12 BEDS 27 0089 00 **PUYALLUP TRIBAL TREATMENT CENTER**

2209 EAST 32ND STREET

TACOMA, WA 98404-0188

LOIS JACOBS ACTING DIRECTOR

PHONE (253) 593-0291 FAX (253) 593-0179

20 BEDS

MAILING ADDRESS

2209 E 32ND ST

TACOMA, WA 98404-0188

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER NATIVE AMERICAN DUI ASSESSMENT NATIVE AMERICAN

* INTENSIVE INPATIENT NATIVE AMERICAN

* INTENSIVE OUTPATIENT NATIVE AMERICAN * OUTPATIENT NATIVE AMERICAN

* RECOVERY HOUSE NATIVE AMERICAN

20 BEDS

27 1278 00 **RAINIER COUNSELING (BONNEY LAKE)**

> 8412 MYERS ROAD, SUITE 305 MIRANDA WEAVER BONNEY LAKE, WA 98390 ADMINISTRATOR

> > PHONE (360) 802-0446 FAX (360) 802-0446

MAILING ADDRESS C/O 847 BLAKE ST

ENUMCLAW, WA 98022

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL ADULTS **DUI ASSESSMENT ADULTS** ADULTS INTENSIVE OUTPATIENT OUTPATIENT **ADULTS**

27 1034 00 **REFLECTIONS RECOVERY & LEARNING CENTER - SPANAWAY**

> HUMAN SERVICES RESEARCH & TRAINING CONSORTIUM, INC. 16204 PACIFIC AVENUE, SUITE A-1

KAREN CHRISTENSEN SPANAWAY, WA 98387 **EXECUTIVE DIRECTOR**

PHONE (253) 536-0275 FAX (253) 536-0869

MAILING ADDRESS

16204 PACIFIC AVE STE A-1 SPANAWAY, WA 98387

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL **ADULT DUI ASSESSMENT ADULT** * INTENSIVE OUTPATIENT **ADULT** * OUTPATIENT **ADULT**

27 1247 00 **REFLECTIONS RECOVERY & LEARNING CENTER - SPANAWAY UNIT 2**

18407 PACIFIC AVENUE S., SUITE 19

SPANAWAY, WA 98387

KAREN CHRISTENSEN **EXECUTIVE DIRECTOR**

PHONE (253) 846-9779 FAX (253) 846-9793

MAILING ADDRESS

18407 PACIFIC AVE S SUITE 19 SPANAWAY, WA 98387

TREATMENT SERVICE

TREATMENT FOCUS

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

27 0364 00 **REFLECTIONS RECOVERY & LEARNING CENTER - TACOMA**

> HUMAN SERVICES RESEARCH & TRAINING CONSRTM, INC. 8907-C GRAVELLY LAKE DRIVE S.W.

LAKEWOOD, WA 98499

KAREN CHRISTENSEN EXECUTIVE DIRECTOR

(253) 581-5556 PHONE (253) 582-3506 FAX

MAILING ADDRESS

8907-C GRAVELLY LK DR SW LAKEWOOD, WA 98499

TREATMENT SERVICE

TREATMENT FOCUS

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT * INTENSIVE OUTPATIENT

* OUTPATIENT

27 0522 00 REMANN HALL ALCOHOL/DRUG DEVELOPMENT PROGRAM (RHADD)

PIERCE COUNTY JUVENILE COURT

5501 - 6TH AVENUE

TACOMA, WA 98406-2697

ROBERT WOMACK **DIRECTOR**

PHONE (253) 798-7900

(253)798-7649 FAX

MAILING ADDRESS

5501 - 6TH AVENUE

TACOMA, WA 98406-2697

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

YOUTH CORRECTIONS

YOUTH CORRECTIONS

27 0899 00 SEA MAR OUTPATIENT SUBSTANCE ABUSE SERVICES - TACOMA

BRANCH OF SEA MAR COMMUNITY HEALTH CENTERS

1112 SOUTH CUSHMAN

TACOMA, WA 98405

KAREN BIER ADMINISTRATOR

PHONE (253) 396-1634

FAX (253) 396-1663

PIERCE

MAILING ADDRESS

1112 S CUSHMAN TACOMA, WA 98405

MISCELLANEOUS

SPANISH

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

SPANISH & ENGLISH SPANISH & ENGLISH

SPANISH & ENGLISH

SPANISH & ENGLISH

27 0521 02 SEA MAR RESIDENTIAL ALCOHOL/DRUG TREATMENT - TACOMA ADULT

BRANCH OF SEA MAR COMMUNITY HEALTH CENTERS

1415 CENTER STREET

TACOMA, WA 98409

ADRIAN MOROLES ADMINISTRATOR

PHONE (253) 627-2250 FAX (253) 627-2173

MAILING ADDRESS

1415 CENTER ST TACOMA, WA 98409

MISCELLANEOUS

SPANISH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE INPATIENT COD-MHC BI-LINGUAL 36 BEDS

27 0165 00 SERENITY COUNSELING SERVICES - FIFE

5113 PACIFIC HWY. E., SUITE 3

FIFE, WA 98424

JO ANN CRISTAL ADMINISTRATOR

PHONE (253) 922-0229 FAX (253) 926-4183

MAILING ADDRESS

5113 PACIFIC HWY E STE 3

FIFE, WA 98424

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

27 1096 00 SOCIAL TREATMENT OPPORTUNITY PROGRAMS II INC (STOP) - PUYALLUP

12812 - 101ST AVENUE COURT EAST, SUITE 103

PUYALLUP, WA 98373

VINCENT MCCRAY ADMINISTRATOR

PHONE (253) 770-4720 FAX (253) 770-4721

MAILING ADDRESS

PO BOX 731845 PUYALLUP, WA 98373

MISCELLANEOUS

YOUTH

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

YOUTH/ADULT

YOUTH/ADULT YOUTH/ADULT

27 0127 02 SOCIAL TREATMENT OPPORTUNITY PROGRAMS, II, INC. (STOP) - TACOMA

4301 SOUTH PINE, SUITE 112

TACOMA, WA 98409

VINCENT MCCRAY PROGRAM DIRECTOR

(253) 471-0890 (360) 943-8810 TACOMA OLYMPIA

FAX (253) 471-0891

PHONE

MAILING ADDRESS

4301 S PINE STE 112 TACOMA, WA 98411

MISCELLANEOUS

CARF ACCREDITED

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADOLESCENT/ADULT ADOLESCENT/ADULT

ADOLESCENT/ADULT

ADOLESCENT/ADULT

27 1155 00 SOUND COUNSELING, INCORPORATED

SOUND COUNSELING 719 EAST MAIN SUITE C

719 EAST MAIN SUITE C PUYALLUP, WA 98372 DAVID A. HARRIS ADMINISTRATOR

PHONE (253) 841-8165 FAX (253) 841-8168

MAILING ADDRESS

719 E MAIN STE C

PUYALLUP, WA 98372

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

27 0189 02 TACON

TACOMA DETOXIFICATION CENTER

BRANCH OF METROPOLITAN DEVELOPMENT COUNCIL

721 SOUTH FAWCETT AVENUE, ROOM 100

TACOMA, WA 98402

MARY DEGRUY PROGRAM DIRECTOR

PHONE FAX (253) 593-2413 (253) 627-4817

MAILING ADDRESS

721 S FAWCETT AVE, RM 100

TACOMA, WA 98402

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

* ACUTE DETOXIFICATION

TREATMENT FOCUS

16 BEDS ADULT & YOUTH

TACOMA TREATMENT SOLUTIONS 27 1117 00

BRANCH OF WCHS. INC. - CRC HEALTH CORPORATION

9500 FRONT STREET, SUITE 100

LAKEWOOD, WA 98409

JOAN BUNNELL

BRANCH ADMINISTRATOR

PHONE (253) 584-3996 FAX (253) 589-1071

MAILING ADDRESS

9500 FRONT ST STE 100 LAKEWOOD, WA 98409

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE DUI ASSESSMENT

INTENSIVE OUTPATIENT

OPIATE DEPENDENCY TREATMENT

OUTPATIENT

OPIATE ADDICTED E-GET GOING

27 0190 00 **TACOMA/PIERCE COUNTY TREATMENT SERVICES - UNIT 1**

PIERCE COUNTY HEALTH DEPARTMENT

3629 SOUTH D STREET, MS 491 TACOMA, WA 98418-6813

DAVE BISCHOF ADMINISTRATOR

PHONE (253) 798-6576 FAX (253) 798-2897

MAILING ADDRESS

3629 SOUTH D ST MS 501 TACOMA, WA 98418-6813

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* OPIATE DEPENDENCY TREATMENT

* OUTPATIENT

TACOMA/PIERCE COUNTY TREATMENT SERVICES - UNIT 2 27 0190 01

BRANCH OF TACOMA/PIERCE COUNTY METHADONE MAINTENANCE

3629 SOUTH D STREET, MS 491 TACOMA, WA 98418-6897

DAVE BISCHOF PROGRAM DIRECTOR

PHONE (253) 798-6576

MAILING ADDRESS

% 3629 SOUTH D ST MS 491 TACOMA, WA 98418-6897

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* OPIATE DEPENDENCY TREATMENT * OUTPATIENT

27 0189 00 THE CENTER (METROPOLITAN DEVELOPMENT COUNCIL)

MAIN FACILITY

721 SOUTH FAWCETT AVENUE #203

TACOMA, WA 98402

JANICE GORRECHT PROGRAM DIRECTOR

PHONE (253) 593-2740 FAX (253) 593-2396

MAILING ADDRESS

721 S FAWCETT AVE #203 TACOMA, WA 98402

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

- * CRISIS INTERVENTION DUI ASSESSMENT
- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

27 0189 04 THE CENTER EAST (SUMNER)

BRANCH OF METROPOLITAN DEVELOPMENT COUNCIL

1110 FRYAR AVENUE #B SUMNER, WA 98390

JANICE GORRECHT PROGRAM DIRECTOR

PHONE (253) 863-0682

(360) 464-6870 HEADQTRS#

 FAX (253) 863-0785

MAILING ADDRESS

PO BOX 1487 SUMNER, WA 98390

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

LOW INCOME/INDIGENT LOW INCOME/INDIGENT

27 0189 03 THE CENTER SOUTH (GRAVELLY LAKE -- LAKEWOOD)

BRANCH OF METROPOLITAN DEVELOPMENT COUNCIL 10510 GRAVELLY LAKE DR SW, SUITE 210

LAKEWOOD, WA 98498

JANICE GORRECHT PROGRAM DIRECTOR

PHONE (253) 589-9662

(253) 593-2740

FAX (253) 589-9762 HEADQTRS#

MAILING ADDRESS

721 S FAWCETT AVE #203 TACOMA, WA 98402

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

LOW INCOME/INDIGENT LOW INCOME/INDIGENT

27 0102 00 VETERANS ADMINISTRATION MEDICAL CENTER/AMERICAN LAKE

> SUBSTANCE ABUSE TREATMENT PROGRAM VA MEDICAL CENTER

TACOMA, WA 98493-5000

RICHARD J. POLLARD, PHD

ADMINISTRATOR

PHONE (253) 582-8440 EXT 71603

MAILING ADDRESS

VETERANS ADMINISTRATION MEDICAL CENTER

TACOMA, WA 98493-5000

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE

TREATMENT FOCUS INTENSIVE INPATIENT

INTENSIVE OUTPATIENT

39 BEDS

WESTERN WASHINGTON ALCOHOL CENTER - TACOMA 27 0103 01

BRANCH OF WESTERN WASHINGTON ALCOHOL CENTER, INC.

504 SOUTH 112TH STREET TACOMA, WA 98444

GLENN L. THOMAS **EXECUTIVE DIRECTOR**

PHONE (253) 536-5549

 FAX

(253) 536-1255

MAILING ADDRESS

504 SO 112TH ST TACOMA, WA 98444

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

SAN JUAN

28 1246 00 **COMPASS HEALTH - SAN JUAN**

520 SPRING STREET

FRIDAY HARBOR, WA 98250

MICHELLE SHOBER

DIRECTOR

PHONE (360) 378-2669

FAX

(360) 378-5669

MAILING ADDRESS

PO BOX 247

FRIDAY HARBOR, WA 98250

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

SKAGIT

29 0194 00 **COMPASS HEALTH - MOUNT VERNON**

> (FORMERLY COMMUNITY MENTAL HEALTH SERVICES) 1100 SOUTH 2ND STREET

MOUNT VERNON, WA 98273-4209

LYNN RETZER PROGRAM DIRECTOR

PHONE (425) 349-6200 FAX (360) 419-3505

JOAN DE LLAMAS, CDSI, CCJS-MAC

(360) 299-1069

PHONE (360) 299-2750

FAX

MAILING ADDRESS

PO BOX 3810 (MS: 106) EVERETT, WA 98213-8810

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

* OUTPATIENT

TREATMENT FOCUS

CO-OCCURING DISORDER

29 0953 00 **DELLAMAS AND ASSOCIATES**

> RESOURCE CENTER AND OUTPATIENT TREATMENT SERVICES 1008 5TH STREET, SUITE A

ANACORTES, WA 98221 OWNER/DIRECTOR

MAILING ADDRESS

1008 5TH ST STE A ANACORTES, WA 98221

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADULT/YOUTH ADULT/YOUTH **ADULT** ADULT/YOUTH

29 0380 00 **FOLLMAN AGENCY - BURLINGTON**

> 910 SOUTH ANACORTES STREET BURLINGTON, WA 98233

HARRIET H. FOLLMAN **ADMINISTRATOR**

PHONE (360) 755-1125 FAX (360) 757-1125

MAILING ADDRESS

910 S ANACORTES ST BURLINGTON, WA 98233-3010

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

YOUTH AND ADULT YOUTH AND ADULT YOUTH AND ADULT YOUTH AND ADULT 29 1146 00 **PHOENIX RECOVERY SERVICES**

1601 EAST COLLEGE WAY, SUITE A

MOUNT VERNON, WA 98273

CAROL HUNDAHL ADMINISTRATOR

PHONE (360) 848-8437 FAX (360) 848-5250

MAILING ADDRESS

1601 E COLLEGE WY STE A MOUNT VERNON, WA 98273

MISCELLANEOUS

PREGNANT & POST-PARTUM YOUTH ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

YOUTH & FAMILY PPW YOUTH & FAMILY PPW

29 0050 02 PIONEER CENTER NORTH - SEDRO WOOLLEY

> BRANCH OF PIONEER HUMAN SERVICES 24961 THOMPSON DRIVE SEDRO WOOLLEY, WA 98284

A. CHRISTINE FURMAN DIRECTOR

PHONE (360) 856-3186 FAX (360) 856-3138

MAILING ADDRESS

PO BOX 231

SEDRO WOOLLEY, WA 98284-0231

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

* ACUTE DETOXIFICATION * LONG-TERM RESIDENTIAL TREATMENT FOCUS

ITA/VOLUNTARY 7 BEDS ITA/VOLUNTARY **134 BEDS**

29 1240 00 **RECOVERY CENTER - SKAGIT COUNTY**

> CATHOLIC COMMUNITY SERVICES-BELLINGHAM 2221 RIVERSIDE DRIVE

MOUNT VERNON, WA 98273

DONNA WELLS

OPERATIONS DIRECTOR

PHONE (360) 416-7546 (360) 416-7541 FAX

MAILING ADDRESS

320 PACIFIC PLACE MOUNT VERNON, WA 98273

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

ADULT YOUTH YOUTH

29 0793 00 SEA MAR SUBSTANCE ABUSE OUTPATIENT SERVICES - MT VERNON

SEA MAR COMMUNITY HEALTH CENTERS 2500 E. COLLEGE WAY, SUITE 100

MT VERNON, WA 98273

RUSS HARDISON ADMINISTRATOR

PHONE (360) 428-8912 FAX (360) 424-6288

MAILING ADDRESS

2500 E COLLEGE WY STE 100 MT VERNON, WA 98273

MISCELLANEOUS

JCAHO ACCREDITED **SPANISH**

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- INTENSIVE OUTPATIENT
- OUTPATIENT

TREATMENT FOCUS

HISPANIC ADULT

HISPANIC ADULT HISPANIC/NON-HISPAN

29 0105 00 SKAGIT RECOVERY CENTER - JOHN KING RECOVERY HOUSE

1905 CONTINENTAL PLACE MOUNT VERNON, WA 98273 ALAN ERICKSON DIRECTOR

PHONE (360) 428-7835

FAX (360) 428-0929

MAILING ADDRESS 1905 CONTINENTAL PL MOUNT VERNON, WA 98273

MISCELLANEOUS

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- INTENSIVE OUTPATIENT
- * OUTPATIENT
- * RECOVERY HOUSE
- * SUB-ACUTE DETOXIFICATION

23 BEDS 7 BEDS

29 1238 00 **SWINOMISH ALCOHOL PROGRAM**

SWINOMISH TRIBAL COMMUNITY 17337 RESERVATION RD.

LACONNER, WA 98257

JOHN STEPHENS

PROGRAMS ADMINISTRATION

(360) 466-7256 PHONE (360) 466-7233

(360) 466-7364 FAX

MAILING ADDRESS

PO BOX 388

LACONNER, WA 98257

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

NATIVE AMERICAN NATIVE AMERICAN

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

OUTPATIENT

29 0713 00 **UNITED NORTHWEST RECOVERY CENTER**

605-B SUNSET PARK DRIVE

SEDRO WOOLLEY, WA 98284

BARBARA THOMPSON/COUSINS

DIRECTOR

PHONE (360) 856-6300 FAX (360) 854-9062

MAILING ADDRESS

605-B SUNSET PARK DRIVE SEDRO WOOLLEY, WA 98284

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

29 1261 00 **UPPER SKAGIT TRIBE CHEMICAL DEPENDENCY TREATMENT PROGRAM**

> UPPER SKAGIT TRIBAL CLINIC 25959 COMMUNITY PLAZA WAY SEDRO WOOLLEY, WA 98284

SUSAN DUNTHORNE SOCIAL SERVICES COORDINATOR

(360) 854-7070 PHONE FAX (360) 854-7060

MAILING ADDRESS

25944 COMMUNITY PLAZA WAY SEDRO WOOLLEY, WA 98284

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL NATIVE AMERICAN **DUI ASSESSMENT** NATIVE AMERICAN INTENSIVE OUTPATIENT NATIVE AMERICAN OUTPATIENT NATIVE AMERICAN

SKAMANIA

CROSSROADS BEHAVIORAL HEALTH - STEVENSON 30 1030 00

350 BULLDOG DRIVE (RELOCATION PENDING)

STEVENSON, WA 98648

VICKIE PFEIFFER

PROGRAM DIRECTOR/CO-OWNER

PHONE (509) 427-7100 FAX (509) 427-7105

MAILING ADDRESS

PO BOX 906

STEVENSON, WA 98648

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT ADULTS

ADULTS (*=CJS ONLY) ADULTS (*=CJS ONLY) 30 0106 00 **SKAMANIA COUNTY COUNSELING CENTER**

> 683 SW ROCK CREEK DRIVE STEVENSON, WA 98648

RICHARD P. JESSEL, PH.D. DIRECTOR

> (509) 427-9488 PHONE

(509) 427-5684 ADATSA

FAX (509) 427-7619

MAILING ADDRESS

PO BOX 790

STEVENSON, WA 98648-0790

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

SNOHOMISH

31 0110 00 A NEW SPIRIT RECOVERY PROGRAM, INC.

> 22617 - 76TH AVE W, SUITE 101 EDMONDS, WA 98026-8316

DONALD COX **ADMINISTRATOR**

PHONE (425) 771-1194 FAX (425) 771-4544

MAILING ADDRESS

22617 - 76TH AVE W, STE 101 EDMONDS, WA 98026-8316

TREATMENT SERVICE

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

31 1264 00 A-1 SOLUTIONS COUNSELING SERVICE - EVERETT

221 S.E. EVERETT MALL WAY, SUITES M-6 & M-10

EVERETT, WA 98208

ANNE LARSON **ADMINISTRATOR**

PHONE (425) 438-8200 FAX (425) 438-8244

MAILING ADDRESS

221 SE EVERETT MALL WY, STE M-6 EVERETT, WA 98208

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

31 1089 00 ACCELERATED TREATMENT SERVICES

6121 - 176TH STREET S.W., SUITE C

LYNNWOOD, WA 98037

NIGEL CIMINO

ACTING ADMINISTRATOR

PHONE (425) 316-3028 FAX call first

MAILING ADDRESS

C/O 4118 127TH ST SE EVERETT, WA 98208-5688

TREATMENT SERVICE
ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

31 0867 00

ALDERWOOD RECOVERY - MOUNTLAKE TERRACE

6405 218TH STREET SW, SUITE 301 MOUNTLAKE TERRACE, WA 98043

JULIE CLARK ADMINISTRATOR

PHONE (425) 478-1000 FAX (425) 670-6578

MAILING ADDRESS

6405 218TH ST SW STE 301 MOUNTLAKE TERRACE, WA 98043

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

ADULT & ADOLESCENT ADULT & ADOLESCENT ADULT & ADOLESCENT ADULT & ADOLESCENT

31 0419 01

ALPHA CENTER FOR TREATMENT - MONROE

146 NORTH BLAKELY STREET MONROE, WA 98272-1415

CAROLYNE PIETZ ADMINISTRATOR

PHONE (360) 794-7187 FAX (360) 805-9181

MAILING ADDRESS

PO BOX 1600 MONROE, WA 98272

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

31 0544 00

ALPINE RECOVERY SERVICES, INC.

16404 SMOKEY POINT BLVD. SUITE 109

ARLINGTON, WA 98223

GREGORY A. BAUER ADMINISTRATOR

PHONE (360) 658-1388 FAX (360) 658-9842

MAILING ADDRESS

16404 SMOKEY PT BLVD STE 109 ARLINGTON, WA 98223

126

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

OUTPATIENT

31 1255 00 **BOWEN RECOVERY CENTER**

OUTPATIENT TREATMENT AND INTENSIVE RELAPSE PREVENTION

1120-164TH STREET S.W., SUITE 1

LYNNWOOD, WA 98037

LINDA BOWEN ADMINISTRATOR

TREATMENT FOCUS

PHONE (425) 787-5833

(425) 787-5899 FAX

MAILING ADDRESS

1120-164TH ST SW, STE 1 LYNNWOOD, WA 98037

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **ADULT** DUI ASSESSMENT **ADULT** INTENSIVE OUTPATIENT **ADULT** OUTPATIENT **ADULT**

31 0476 00 CATHOLIC COMMUNITY SERVICES - RECOVERY CENTER - LYNNWOOD

19417 - 36TH AVENUE WEST, SUITE C&D

LYNNWOOD, WA 98036

THOMAS L. MACINTYRE AGENCY DIRECTOR

PHONE (425) 774-4333 FAX (425) 776-1109

MAILING ADDRESS

19417 36TH AVE W STE C&D LYNNWOOD, WA 98036

MISCELLANEOUS

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER ADULT ALCOHOL & DRUG INFORMATION SCHOOL YOUTH/ADULT DUI ASSESSMENT YOUTH/ADULT

* INTENSIVE OUTPATIENT YOUTH/ADULT/JRA * OUTPATIENT YOUTH/ADULT/JRA

31 0857 00 CATHOLIC COMMUNITY SERVICES - RECOVERY CENTER - MARYSVILLE

> 1227 2ND STREET THOMAS L. MACINTYRE MARYSVILLE, WA 98270 AGENCY DIRECTOR

PHONE (360) 651-2366 FAX (360) 653-3119

MAILING ADDRESS

1227 2ND ST

MARYSVILLE, WA 98270

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT YOUTH/ADULT YOUTH/ADULT YOUTH/ADULT/JRA YOUTH/ADULT/JRA

31 0344 00

CATHOLIC COMMUNITY SERVICES - EVERETT

1114 PACIFIC AVENUE, 3RD FLOOR

EVERETT, WA 98201

THOMAS L. MACINTYRE AGENCY DIRECTOR

PHONE (425) 258-5270 FAX (425) 258-5275

MAILING ADDRESS

1114 PACIFIC AVE 3RD FL EVERETT, WA 98201

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

31 0732 00

CATHOLIC COMMUNITY SERVICES - TREE OF LIFE

BRANCH OF CATHOLIC COMMUNITY SERVICES, SNOHOMISH COUNTY

10110 19TH AVENUE SE, SUITE R-100

EVERETT, WA 98208

THOMAS L. MACINTYRE AGENCY DIRECTOR

PHONE (425) 337-7817 FAX (425) 337-6586

MAILING ADDRESS

10110 19TH AVE SE #R-100 EVERETT, WA 98208

MISCELLANEOUS

PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

* INTENSIVE OUTPATIENT

* OUTPATIENT

PPW

PPW

31 0523 00

CENTER FOR COUNSELING & HEALTH RESOURCES / EDMONDS

EDMONDS MAIN FACILITY - THE CENTER, INC.

547 DAYTON STREET EDMONDS, WA 98020

LAURA MINOR ADMINISTRATOR

PHONE (425) 771-5166 FAX (425) 670-2807

MAILING ADDRESS

P.O. BOX 700

EDMONDS, WA 98020

MISCELLANEOUS

YOUTH

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH

31 0741 00

CENTER FOR COUNSELING & HEALTH RESOURCES / STANWOOD BRANCH

BRANCH OF THE CENTER INC.

9727 - 271ST N.W. STANWOOD, WA 98292 LAURA MINOR ADMINISTRATOR

PHONE (360) 629-4842 FAX (360) 629-2462

MAILING ADDRESS

PO BOX 700

EDMONDS, WA 98020

TREATMENT SERVICE

INTENSIVE OUTPATIENT

DUI ASSESSMENT

OUTPATIENT

MISCELLANEOUS

YOUTH

TREATMENT FOCUS

ADULT

ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH

31 1215 00

CENTER FOR COUNSELING & HEALTH RESOURCES, THE / EVERETT

BRANCH OF THE CENTER, INC.

ALCOHOL & DRUG INFORMATION SCHOOL

13000 - 21ST DRIVE S.E.

LAURA MINOR EVERETT, WA 98208

ADMINISTRATOR/TX DIRECTOR

PHONE (425) 338-7671 FAX (425) 338-7672

MAILING ADDRESS

547 DAYTON STREET EDMONDS, WA 98020

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

31 1211 00

CLEARVIEW COUNSELING (PREVENTION AND TREATMENT PROFESSIONALS)

1106 COLUMBIA AVE. SCOTT WYKES

MARYSVILLE, WA 98270 **EXECUTIVE DIRECTOR**

> PHONE (360) 653-0374 (360) 658-2019 FAX

MAILING ADDRESS

1106 COLUMBIA AVE. MARYSVILLE, WA 98270

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

129

31 1131 00 COLE'S COUNSELING CENTER, INC.

8923 - 236TH S.W., SUITE C EDMONDS, WA 98026 KEVIN COLE EXECUTIVE DIRECTOR

PHONE (425) 778-7118 TTY 1-800-833-6384 FAX (425) 778-7183

MAILING ADDRESS

8923 236TH SW STE C EDMONDS, WA 98026

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

31 0162 00 CROSBY RECOVERY CENTER (LYNNWOOD)

CROSBY ENTERPRISES INC. 3924 - 204TH STREET S.W. LYNNWOOD, WA 98036

PATTI ROTTINGHAUS ADMINISTRATOR

PHONE (425) 774-2955 FAX (425) 774-9589

MAILING ADDRESS

3924 204TH ST SW LYNNWOOD, WA 98036

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

31 1029 00 DOC - EVERETT COMMUNITY JUSTICE CENTER

OCO/CD TREATMENT SERVICES 8625 EVERGREEN WAY, #108 EVERETT, WA 98208-2620

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

TREATMENT SERVICE

INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

OFFENDERS OFFENDERS

31 0769 00 DOC - MONROE CORRECTIONS CENTER

OCO/CD TREATMENT SERVICES 16700 - 177TH AVE. SE MONROE, WA 98272-0777

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961 MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

INTENSIVE OUTPATIENT LONG-TERM RESIDENTIAL

OUTPATIENT

TREATMENT FOCUS

CORRECTIONAL CORRECTIONAL

10 BEDS

31 0768 00 DOC - TWIN RIVERS CORRECTIONS CENTER

OCO/CD TREATMENT SERVICES 16774 - 170TH DRIVE S.E.

MONROE, WA 98272

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

TREATMENT SERVICE

31 0376 00

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

TREATMENT FOCUS

OFFENDERS

INTENSIVE OUTPATIENT

(FORMERLY CHOICES/CHANGES & A SOLUTION REC PROG)

7207 EVERGREEN WAY, SUITE M EVERETT, WA 98203

EVERETT TREATMENT SERVICES

JULIA HUGHES ADMINISTRATOR

PHONE (425) 347-9070 FAX (425) 348-3676

MAILING ADDRESS

7207 EVERGREEN WY #M EVERETT, WA 98203-5678

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

31 0891 00 EVERGREEN MANOR DETOX

BRANCH OF EVERGREEN MANOR, INC. 2601 SUMMIT AVENUE, BLDG. C

EVERETT, WA 98201

LINDA GRANT EXECUTIVE DIRECTOR

PHONE (425) 258-2407

(425) 258-3255 DETOX #

MAIN#

FAX (425) 339-2601

MAILING ADDRESS

PO BOX 12598

EVERETT, WA 98206-2598

MISCELLANEOUS

CARF ACCREDITED

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* SUB-ACUTE DETOXIFICATION

15 BEDS

31 0108 03 EVERGREEN MANOR OUTPATIENT SERVICES - MAIN CAMPUS

BRANCH OF EVERGREEN MANOR. INC.

2601 SUMMIT AVENUE

EVERETT, WA 98201

LINDA GRANT EXECUTIVE DIRECTOR

PHONE (425) 258-2407 FAX (425) 339-2601

MAILING ADDRESS

P.O. BOX 12598

EVERETT, WA 98206-2598

MISCELLANEOUS

CARF ACCREDITED

TREATMENT SERVICE

TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

31 1095 00 EVERGREEN MANOR OUTPATIENT SERVICES- WALL STREET CAMPUS

BRANCH OF EVERGREEN MANOR, INC.

2932 HOYT AVE

EVERETT, WA 98201

LINDA GRANT EXECUTIVE DIRECTOR

PHONE (425) 259-5842 TTY (800) 833-6384 FAX (425) 259-0243

MAILING ADDRESS

PO BOX 12598

EVERETT, WA 98206-2598

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

31 0108 02 EVERGREEN MANOR RESIDENTIAL SERVICES-UNIT 1 (BLDG B)

BRANCH OF EVERGREEN MANOR, INC.

2601 SUMMIT AVENUE

EVERETT, WA 98201

LINDA GRANT
EXECUTIVE DIRECTOR

PHONE (425) 258-2407 FAX (425) 339-2601

MAILING ADDRESS

PO BOX 12598

EVERETT, WA 98206-2598

MISCELLANEOUS

PREGNANT & POST-PARTUM

CARF ACCREDITED

* INTENSIVE INPATIENT

* LONG-TERM RESIDENTIAL

TREATMENT FOCUS

7 BEDS PPW PPW 6 BEDS

31 0108 01 **EVERGREEN RESIDENTIAL SERVICES -UNIT 2 (BLDG C)**

BRANCH OF EVERGREEN MANOR, INC.

2601 SUMMIT AVENUE, BLDG. C

EVERETT, WA 98201

LINDA GRANT

EXECUTIVE DIRECTOR

PHONE (425) 258-2407 FAX (425) 339-2601

MAILING ADDRESS

P.O. BOX 12598

EVERETT, WA 98206-2598

MISCELLANEOUS

CARF ACCREDITED

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* INTENSIVE INPATIENT PPW 5 BEDS * LONG-TERM RESIDENTIAL PPW 4 BEDS

31 1167 00 **FIRE WITH FIRE INTERVENTIONS**

17707 WEST MAIN STREET, SUITE 203

MONROE, WA 98272

ELAINE DREGER **ADMINISTRATOR**

PHONE (360) 794-5489 (360) 794-6899

FAX **MAILING ADDRESS**

17707 W MAIN ST STE 203 MONROE, WA 98272

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

31 0107 02 **FOCUS - ARLINGTON**

> BRANCH OF FOCUS, NPO 509 N. WEST AVENUE, SUITE B

ARLINGTON, WA 98223

PERRY B. MOWERY EXECUTIVE DIRECTOR

PHONE (425) 349-8130 (425) 349-8126 FAX

MAILING ADDRESS

509 N WEST AVE STE B

ARLINGTON, WA 98223

MISCELLANEOUS

CARF ACCREDITED

YOUTH

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT

ADULT

ADULT & YOUTH

ADULT & YOUTH

31 0109 00

FOCUS - EVERETT

FOCUS, NPO

909 S.E. EVERETT MALL WAY, SUITE C364

EVERETT, WA 98208

PERRY B. MOWERY EXECUTIVE DIRECTOR

PHONE (425) 349-6240 FAX (425) 349-6207

MAILING ADDRESS

909 SE EVERETT MALL WY SUITE C364

EVERETT, WA 98208

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

YOUTH ALSO YOUTH ALSO

31 1139 00 ISLAND CROSSING COUNSELING SERVICES

> STILLAGUAMISH TRIBE OF INDIANS 21123 SMOKEY POINT BOULEVARD

ARLINGTON, WA 98223

THOMAS ASHLEY DIRECTOR

PHONE (360) 652-9640 (360) 652-2093 FAX

MAILING ADDRESS

21123 SMOKEY POINT BLVD ARLINGTON, WA 98223

MISCELLANEOUS

NATIVE AMERICAN ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

NATIVE AMERICANS

31 0094 01 LAKESIDE-MILAM RECOVERY CENTER NORTH (EDMONDS - FORMERLY SEATTLE)

BRANCH OF LAKESIDE-MILAM RECOVERY CENTERS, INC.

7935 LAKE BALLINGER WAY

EDMONDS, WA 98026-9166

* OPIATE DEPENDENCY TREATMENT

PAULETTE HARRIS

ADMINISTRATOR

PHONE (425) 670-3664

(425) 672-6022 FAX

MAILING ADDRESS

7935 LAKE BALLINGER WAY EDMONDS, WA 98026-9166

MISCELLANEOUS

CARF ACCREDITED TREATMENT SERVICE

TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

INTENSIVE OUTPATIENT

OUTPATIENT

31 0046 03 LAKESIDE-MILAM RECOVERY CENTERS, INC. (EVERETT)

111 SE EVERETT MALL WAY, BLDG A, STE 101

EVERETT, WA 98208

ART BERGH **ADMINISTRATOR**

PHONE (425) 267-9573 FAX (425) 267-9062

MAILING ADDRESS

111 SE EVERETT MALL WY BLDG A-101

EVERETT, WA 98208

MISCELLANEOUS

CARF ACCREDITED

TREATMENT FOCUS

TREATMENT SERVICE ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

NORTH SOUND ASSESSMENT AND COUNSELING SERVICES 31 0751 00

> 1316 WALL STREET, SUITE 2A EVERETT, WA 98201-3942

THOMAS COOLBERTH **ADMINISTRATOR**

PHONE (425) 252-1779 FAX (425) 252-8156

MAILING ADDRESS

1316 WALL ST STE 2A EVERETT, WA 98201-3942

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT

OUTPATIENT

31 0300 00 **OPTIONS - LYNNWOOD**

OPTIONS TREATMENT AND EVALUATIONS, INC.

15620 HIGHWAY 99, SUITE 6 LYNNWOOD, WA 98037-1476

ARLYNE SUSIE PLANTZ **ADMINISTRATOR**

PHONE (425) 742-6410

MAILING ADDRESS

15620 HWY 99 STE 6

LYNNWOOD, WA 98037-1476

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

PORT GARDNER BAY RECOVERY 31 1144 00

2722 COLBY AVENUE, SUITE 424

EVERETT, WA 98201

KIMBERLI J. MCCABE **ADMINISTRATOR**

PHONE (425) 252-4656 FAX (425) 252-4308

MAILING ADDRESS

2722 COLBY AVENUE, SUITE 424

EVERETT, WA 98201

135

TREATMENT SERVICE

TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

31 0357 00 PROVIDENCE RECOVERY PROGRAM - BEHAVIORAL HEALTH SERVICES

PROVIDENCE GENERAL MEDICAL CENTER

916 PACIFIC AVENUE

EVERETT, WA 98206

CHERYL SACKRIDER

DIRECTOR

PHONE (425) 258-7390 (425) 258-7798

RESIDENT. OUTPATIENT

FAX (425) 258-7379

MAILING ADDRESS

P.O. BOX 1067 EVERETT, WA 98206

MISCELLANEOUS

JCAHO ACCREDITED

PREGNANT & POST-PARTUM

TREATMENT SERVICE TREATMENT FOCUS

ACUTE DETOXIFICATION 14 BEDS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

PPW INTENSIVE INPATIENT

INTENSIVE OUTPATIENT ALSO SENIORS 55+

OUTPATIENT

31 1046 00 SEA MAR COMMUNITY HEALTH CARE CENTERS - MONROE

BRANCH OF SEA MAR COMMUNITY HEALTH CARE CENTERS

17146 BEATON ROAD #6 (MOVE PENDING)

MONROE, WA 99272

CLAUDIA D'ALLEGRI PROGRAM DIRECTOR

PHONE (360) 805-3122

FAX (360) 805-9180

14 BFDS

MAILING ADDRESS

909 W MAIN STE 102A

EVERETT, WA 98272

MISCELLANEOUS

SPANISH

TREATMENT SERVICE TREATMENT FOCUS

* ADATSA ASSESSMENT CENTER

* OUTPATIENT

HISPANIC

HISPANIC

31 0521 01 SEA MAR SUBSTANCE ABUSE SERVICES - EVERETT BRANCH

SEA MAR COMMUNITY HEALTH CENTERS

8625 EVERGREEN WAY, SUITE 255

EVERETT, WA 98208-2620

CLAUDIA D'ALLEGRI ADMINISTRATOR

PHONE (425) 347-5415

(425) 347-2976 FAX

MAILING ADDRESS

8625 EVERGREEN WY STE 255 EVERETT, WA 98208-2620

MISCELLANEOUS

SPANISH

YOUTH

ON-LINE REPORTING

EXT. 10

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

HISPANIC HISPANIC

MIGRANT/SPANISH SPEA MIGRANT/SPANISH SPEA MIGRANT/SPANISH SPEA

31 0813 00 STILLAGUAMISH TRIBE OF INDIANS

ALCOHOL AND DRUG TREATMENT PROGRAM 902 EAST MAPLE STREET ARLINGTON, WA 98223

THOMAS ASHLEY ADMINISTRATOR

PHONE (360) 435-9338

TTY (800) 833-6388 FAX (360) 403-7924

MAILING ADDRESS

PO BOX 277

ARLINGTON, WA 98223-0277

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT ADULT

NATIVE AMERICAN

ADULT

31 1241 00 STILLAGUAMISH TRIBE OF INDIANS-ALCOHOL & DRUG TREATMENT PROG

4126 - 172ND STREET N.E. ARLINGTON, WA 98223 TOM ASHLEY ADMINISTRATOR

PHONE (360) 653-1104 FAX (360) 657-2884

MAILING ADDRESS

4126 172ND ST NE

ARLINGTON, WA 98223

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

31 1112 00 THERAPEUTIC HEALTH SERVICES - EVERETT BRANCH

BRANCH OF THERAPEUTIC HEALTH SERVICES 9930 EVERGREEN WAY, BLDG Z150

EVERETT, WA 98204

MARLI BRICKER BRANCH MANAGER

PHONE (425) 347-5121 FAX (425) 353-6425

MAILING ADDRESS

9930 EVERGREEN WY BLDG Z150

EVERETT, WA 98204

MISCELLANEOUS

CARF ACCREDITED

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

DUI ASSESSMENT INTENSIVE OUTPATIENT

* OPIATE DEPENDENCY TREATMENT

OUTPATIENT

31 0240 00 TULALIP TRIBAL FAMILY SERVICES CHEMICAL DEPENDENCY PROGRAM

MAIN FACILITY - OUTPATIENT 2821 MISSION HILL RD MARYSVILLE, WA 98270

GAYLE A. JONES, BA, CDSIII ADMINISTRATOR

OUTPATIENT

(360) 651-4400 (360) 651-4000 (360) 651-3350

TRIBAL OFC YOUTH OP

FAX (36

PHONE

(360) 651-4404

MAILING ADDRESS

2821 MISSION HILL RD MARYSVILLE, WA 98270

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMER. ADULT NATIVE AMER. ADULT NATIVE AMER. ADULT NATIVE AMER. ADULT

31 0889 00 TULALIP TRIBES FAMILY SERVICES CD YOUTH PROGRAM

BRANCH OF TULALIP TRIBAL FAMILY SERVICES

2821 MISSION HILL ROAD

MARYSVILLE, WA 98271

GAYLE JONES

PROGRAM ADMINISTRATOR

PHONE (360) 651-3350 FAX (360) 651-3355

MAILING ADDRESS

% 6700 TOTEM BEACH RD MARYSVILLE, WA 98271

MISCELLANEOUS

NATIVE AMERICAN

YOUTH

ON-LINE REPORTING

TREATMENT FOCUS

NATIVE AMERIC. YOUTH NATIVE AMERIC. YOUTH

* INTENSIVE OUTPATIENT

* OUTPATIENT

31 0112 00

VALLEY GENERAL HOSPITAL BEHAVIORAL HEALTH SERVICES

14701 - 179TH AVENUE SE MONROE, WA 98272 DAVID ANDERSON ADMINISTRATOR

PHONE (360) 794-1405 FAX (360) 794-1493

MAILING ADDRESS

P.O. BOX 646

MONROE, WA 98272-0646

MISCELLANEOUS

JCAHO ACCREDITED PREGNANT & POST-PARTUM

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE INPATIENT **ADULT** 20 BEDS

INTENSIVE OUTPATIENT **ADULT**

OUTPATIENT DAY TREATMENT ALSO

SUB-ACUTE DETOXIFICATION ADULT

31 1121 00 WCHS, INC. (LYNNWOOD CLINIC)

BRANCH OF WCHS, INC. - CRC HEALTH CORPORATION

18631 ALDERWOOD MALL PARKWAY

LYNNWOOD, WA 98037

DAVID NEWMAN CLINIC DIRECTOR

PHONE (425) 672-7293 FAX (425) 672-8060

MAILING ADDRESS

18631 ALDERWOOD MALL PKWY

LYNNWOOD, WA 98037

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

OPIATE DEPENDENCY TREATMENT

TREATMENT FOCUS

OPIATE ADDICTED

SPOKANE

32 0512 01 ABSTEMIOUS OUTPATIENT CLINIC, INC. - SPOKANE BRANCH

BRANCH OF ABSTEMIOUS OUTPATIENT CLINIC, INC.

10525 E. MAIN

SPOKANE, WA 99206

RON PHELPS

EXECUTIVE DIRECTOR

PHONE (509) 927-7814 FAX (509) 927-4669

MAILING ADDRESS

10525 E. MAIN

SPOKANE, WA 99206

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL ADULT **DUI ASSESSMENT ADULT** INTENSIVE OUTPATIENT ADULT OUTPATIENT ADULT

32 0512 00 ABSTEMIOUS OUTPATIENT CLINIC, INC. - SPOKANE MAIN FACILITY

WEST 1007 FRANCIS LANNY MINUTO

SPOKANE, WA 99205 REGIONAL PROGRAMS COORDINATOR

> (509) 326-7721 (509) 326-7756 FAX

PHONE

MAILING ADDRESS

W 1007 FRANCIS SPOKANE, WA 99205

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **ADULT DUI ASSESSMENT ADULT** INTENSIVE OUTPATIENT **ADULT** OUTPATIENT ADULT

SPOKANE

32 1077 00 ADEPT ASSESSMENT CENTER

> 1321 NORTH ASH SPOKANE, WA 99201

SHANA WINDHORST ADMINISTRATOR

FAX

(509) 327-3120 PHONE

(509) 327-3163 (509) 327-3228

MAILING ADDRESS

DUI ASSESSMENT

1321 N ASH

SPOKANE, WA 99201 TREATMENT SERVICE

TREATMENT FOCUS

& GENERAL CD ASSMTS

ALCOHOL/DRUG NETWORK (CHIPS) 32 0113 00

SPOKANE REGIONAL HEALTH DISTRICT

WEST 1101 COLLEGE AVENUE SPOKANE, WA 99201-2095

DR. MICHAEL AKPAMGBO **ADMINISTRATOR**

(509) 324-1420 PHONE (509) 324-3622 FAX

MAILING ADDRESS

W 1101 COLLEGE AVE SPOKANE, WA 99201-2095

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ADATSA ASSESSMENT CENTER DUI ASSESSMENT

* OPIATE DEPENDENCY TREATMENT

32 0967 00 AMERICAN BEHAVIORAL HEALTH SYSTEMS, INC.

> 44 EAST COZZA DRIVE G. CRAIG PHILLIPS SPOKANE. WA 99208 **ADMINISTRATOR**

> > PHONE (509) 325-6800

FAX (509) 326-5025

RICKI HAUGEN

MAILING ADDRESS

PO BOX 9977

SPOKANE, WA 99209-9977

TREATMENT FOCUS TREATMENT SERVICE

INTENSIVE INPATIENT **ADULTS** 63 BEDS

INTENSIVE OUTPATIENT **ADULTS**

LONG-TERM RESIDENTIAL 5 BEDS **ADULTS** * RECOVERY HOUSE **ADULTS** 49 BEDS

32 1174 00 **CAMAS INSTITUTE BEHAVIORAL HEALTH SERVICES**

> KALISPEL TRIBE OF INDIANS 934 SOUTH GARFIELD ROAD

AIRWAY HEIGHTS, WA 99001 DIRECTOR OF BEH HEALTH

PHONE (509) 456-0799 FAX (509) 343-4128

MAILING ADDRESS

934 SOUTH GARFIELD ROAD AIRWAY HEIGHTS, WA 99001

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

32 0255 00 **COLONIAL CLINIC**

> 910 N WASHINGTON, SUITE 210 SPOKANE, WA 99201-2260

HENRY GOKEE

EXECUTIVE DIRECTOR

PHONE (509) 327-9831 FAX (509) 327-9857

MAILING ADDRESS

910 N WASHINGTON, SUITE 210 SPOKANE, WA 99201-2260

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL **ADULT** DUI ASSESSMENT **ADULT** INTENSIVE OUTPATIENT ADULT OUTPATIENT **ADULT**

32 0120 00 **COMMUNITY DETOX SERVICES OF SPOKANE**

DETOX, TRANSITIONAL HOUSING, VAN SERVICE (FKA SPOKANE CARE SVC)

312 WEST 8TH AVENUE SPOKANE, WA 99204

KAREN BOUGET-OROSCO EXECUTIVE DIRECTOR

PHONE (509) 477-4630 MAIN# (509) 477-4650 **DETOX**

(509) 477-4630

FAX

MAILING ADDRESS

PO BOX 2845

SPOKANE, WA 99220-2845

MISCELLANEOUS

PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

EMERGENCY SERVICE PATROL ADULT

SUB-ACUTE DETOXIFICATION YOUTH 1 BED 16 BEDS

DAYBREAK OF SPOKANE (INTENSIVE INPATIENT PROGRAM) 32 0116 01

BRANCH OF DAYBREAK OF SPOKANE

628 SOUTH COWLEY SPOKANE, WA 99202 RICHARD MILES TREATMENT DIRECTOR

PHONE

(509) 624-3227 TX FAC ADMIN OFFC (509) 927-1688

(509) 835-4272 FAX

SPOKANE, WA 99202

MAILING ADDRESS

628 S COWLEY

MISCELLANEOUS

YOUTH ON-LINE REPORTING

SPOKANE

TREATMENT SERVICE

TREATMENT FOCUS

* INTENSIVE INPATIENT

YOUTH ONLY

40 BEDS

(509) 459-3920

32 0116 00

DAYBREAK OF SPOKANE (OUTPATIENT PROGRAM)

960 EAST 3RD SPOKANE, WA 99202 RICHARD MILES TREATMENT DIRECTOR

PHONE (509) 624-3227

FAX

EXT. 24

MAILING ADDRESS

% 11711 E SPRAGUE AVE STE D4 SPOKANE VALLEY, WA 99206

MISCELLANEOUS

TREATMENT SERVICE

YOUTH

* OUTPATIENT

TREATMENT FOCUS

YOUTH ONLY

32 0828 00

DAYBREAK OF SPOKANE (VALLEY OUTPATIENT PROGRAM)

BRANCH OF DAYBREAK OF SPOKANE

11707 EAST SPRAGUE, SUITE D-4

SPOKANE, WA 99206

TIMOTHY K. SMITH **ADMINISTRATOR**

PHONE FAX

(509) 927-1991 (509) 927-1851

MAILING ADDRESS

C/O 11711 E SPRAGUE AVE STE D4

SPOKANE, WA 99206

TREATMENT SERVICE

MISCELLANEOUS

OUTPATIENT

YOUTH

TREATMENT FOCUS

YOUTH ONLY

32 0731 00

DEER PARK RECOVERY

EAST 20 J STREET, SUITE B (MOVE PENDING)

DEER PARK, WA 99006

ANDREW J. DOWNING ADMINISTRATOR/OWNER

PHONE (509) 276-2797

FAX

(509) 276-8155

MAILING ADDRESS

PO BOX 117

DEER PARK, WA 99006

MISCELLANEOUS

YOUTH

TREATMENT FOCUS

ADULT/YOUTH ADULT/YOUTH ADULT/YOUTH

INTENSIVE OUTPATIENT

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

OUTPATIENT

TREATMENT SERVICE

32 0757 00 **DOC - AIRWAY HEIGHTS CORRECTIONS CENTER**

> OCO/CD TREATMENT SERVICES 11929 WEST SPRAGUE AVENUE

> AIRWAY HEIGHTS, WA 99001-6710

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

CORRECTIONAL CORRECTIONAL

32 0760 00 **DOC - BROWNSTONE WORK RELEASE**

OCO/CD TREATMENT SERVICES

223 SOUTH BROWNE

SPOKANE, WA 99201

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

(360) 493-6469 (360) 407-3961 FAX

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

OUTPATIENT

TREATMENT FOCUS

CORRECTIONAL

32 0268 02 **DOC - ELEANOR CHASE WORK RELEASE (WOMEN ONLY)**

OCO/CD TREATMENT SERVICES

WEST 427 - 7TH AVENUE

SPOKANE, WA 99204

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE FAX

(360) 493-6469 (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

LONG-TERM RESIDENTIAL

OUTPATIENT RECOVERY HOUSE TREATMENT FOCUS

CORRECTIONAL 15 BEDS

CORRECTIONAL CORRECTIONAL

5 BEDS

32 0553 00 **DOC - PINE LODGE CORRECTIONS CENTER**

OCO/CD TREATMENT SERVICES

SOUTH 751 PINE STREET

MEDICAL LAKE, WA 99022

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE

(360) 493-6469

FAX

(360) 407-3961

SPOKANE

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

INTENSIVE OUTPATIENT LONG-TERM RESIDENTIAL TREATMENT FOCUS

CORRECTIONAL

CORRECTIONAL 72 BEDS

FAX

32 0930 00

DOC - SPOKANE COMMUNITY JUSTICE CENTER

OCO/CD TREATMENT SERVICES 715 EAST SPRAGUE, #107

SPOKANE, WA 99202

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469

(509) 363-2720

TX AGENCY (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS

CORRECTIONAL CORRECTIONAL

32 0893 00

EXCELSIOR YOUTH CENTERS, INC. - SPOKANE

WEST 3754 INDIAN TRAIL ROAD

SPOKANE, WA 99208

ROBERT L. FALTERMEYER

ADMINISTRATOR

PHONE (509) 328-7041 (509) 328-7582 FAX

MAILING ADDRESS

W 3754 INDIAN TRAIL RD SPOKANE, WA 99208

MISCELLANEOUS

YOUTH

* OUTPATIENT

ON-LINE REPORTING TREATMENT SERVICE

INTENSIVE INPATIENT

* RECOVERY HOUSE

TREATMENT FOCUS

YOUTH

YOUTH

YOUTH

12 BEDS

13 BEDS

32 0388 00

GATEWAY COUNSELING SERVICES

140 SOUTH ARTHUR, SUITE 506

SPOKANE, WA 99202

NEAL HAYDEN

ADMINISTRATOR/OWNER

PHONE (509) 532-8855

(509) 532-8844

FAX (509) 532-8855

MAILING ADDRESS

140 S ARTHUR STE 506 SPOKANE, WA 99202

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT ADULT INTENSIVE OUTPATIENT ADULT OUTPATIENT ADULT ADULT

32 0348 00 GROUP HEALTH COOPERATIVE - COMMUNITY NETWORK CLINICAL SUPPORT DIV

BEHAVIORAL HEALTH SERVICES

322 W. NORTH RIVER DRIVE SPOKANE, WA 99201 LORRAINE COSTANZA CD PROGRAM MANAGER

PHONE (509) 241-2575 FAX (509) 241-2312

MAILING ADDRESS 322 W NORTH RIVER DR SPOKANE, WA 99201

TREATMENT SERVICE TREATMENT FOCUS

ADULT

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

32 0536 01 INLAND PROFESSIONAL SERVICES - DIVISION

NORTHTOWN OFFICE BUILDING BRANCH NORTH 4407 DIVISION STREET #618

SPOKANE, WA 99207

TONY MCBRIDE ADMINISTRATOR

PHONE (509) 534-8713 FAX (509) 534-8746

MAILING ADDRESS % 104 S FREYA YFB #109 SPOKANE, WA 99202-4881

MISCELLANEOUS
CARF ACCREDITED

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL ADULT INTENSIVE OUTPATIENT ADULT OUTPATIENT ADULT

32 0197 01 ISABELLA HOUSE

BRANCH OF NEW HORIZON CARE CENTERS

WEST 2308 3RD AVENUE SPOKANE, WA 99202

> PHONE (509) 624-1244 FAX (509) 624-6240

FARIBA NIKDEL

ADMINISTRATOR

MAILING ADDRESS

P.O. BOX 4627

SPOKANE, WA 99220-0627

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE INPATIENT PPW 24 BEDS
* LONG-TERM RESIDENTIAL PPW 14 BEDS

145

SPOKANE

32 0351 00 LAKESIDE RECOVERY CENTER - SPOKANE

3710 NORTH MONROE SPOKANE, WA 99205 DIANE R. KRESS ADMINISTRATOR

TONI LODGE

MARILYN BORDNER

PHONE (509) 328-5234 FAX (509) 328-2358

MAILING ADDRESS

3710 N MONROE SPOKANE, WA 99205

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
INTENSIVE OUTPATIENT
OUTPATIENT
ADULT
ADULT

32 0556 00 N.A.T.I.V.E. PROJECT

ALCOHOL/DRUG OUTPATIENT PROGRAM

1803 WEST MAXWELL

SPOKANE, WA 99201-2831 EXECUTIVE DIRECTOR

PHONE (509) 325-5502 FAX (509) 325-9839

MAILING ADDRESS

1803 W MAXWELL SPOKANE, WA 99201-2831

MISCELLANEOUS

NATIVE AMERICAN

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE OUTPATIENT YOUTH

* OUTPATIENT

32 0647 00 NEW DIRECTIONS OUTPATIENT CLINIC

2132 W. NORTHWEST BOULEVARD FLORENCE JOHNSON-ARNETT SPOKANE, WA 99205 PROGRAM MANAGER

PHONE (509) 838-0304 FAX (509) 462-0530

TREATMENT FOCUS

MAILING ADDRESS

2132 W NORTHWEST BLVD SPOKANE, WA 99205-3782

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
INTENSIVE OUTPATIENT

OUTPATIENT

ADULT & ADOLESCENT

ADULT & ADOLESCENT

ADULT & ADOLESCENT

ADULT & ADOLESCENT

32 0197 02 NEW HORIZON COUNSELING SERVICES

BRANCH OF NEW HORIZON CARE CENTERS 504 EAST 2ND AVENUE

SPOKANE, WA 99202 BRANCH ADMINISTRATOR

PHONE (500) 828 6002

PHONE (509) 838-6092 FAX (509) 838-6110 MAILING ADDRESS

P.O. BOX 4627

SPOKANE, WA 99220-0627

MISCELLANEOUS

PREGNANT & POST-PARTUM

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL
DUI ASSESSMENT
INTENSIVE OUTPATIENT
OUTPATIENT
ADULT
ADULT

32 0114 01 NEW HORIZON COUNSELING SERVICES - VALLEY OFFICE

BRANCH OF NEW HORIZON CARE CENTERS

15407 E. MISSION, SUITE 100

SPOKANE, WA 99037

MARILYN BORDNER BRANCH MANAGER

PHONE (509) 927-1543 FAX (509) 927-4761

MAILING ADDRESS

PO BOX 4627

SPOKANE, WA 99202-0627

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
INTENSIVE OUTPATIENT

OUTPATIENT

ADULT

ADULT

ADULT

32 0944 00 NORTH EAST WASHINGTON TREATMENT ALTERNATIVES - TASC

TREATMENT ACCOUNTABILITY FOR SAFER COMMUNITIES (TASC)

1224 NORTH ASH STREET JASON KING

SPOKANE, WA 99201 TASC PROGRAM MANAGER

PHONE (509) 326-7740 TTY (509) 328-4125 FAX (509) 326-6725

MAILING ADDRESS

1224 N. ASH ST. SPOKANE, WA 99201

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* TASC TASC

32 0268 00 NORTHEAST WASHINGTON TREATMENT ALTERNATIVES

1224 NORTH ASH

LORENZO L. DRIGGS
SPOKANE, WA 99201

EXECUTIVE DIRECTOR

PHONE (509) 326-7740

(509) 328-6257 DRUG TESTS

TTY (509) 328-4125 FAX (509) 326-6725

MAILING ADDRESS

1224 NORTH ASH SPOKANE, WA 99201

SPOKANE

MISCELLANEOUS

PREGNANT & POST-PARTUM

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT
* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT ADULT ADULT

32 0987 00 PARTNERS WITH FAMILIES AND CHILDREN: SPOKANE

613 SOUTH WASHINGTON SPOKANE, WA 99204 MARY ANN MURPHY

DIRECTOR

PHONE (509) 473-4810 FAX (509) 473-4840

MAILING ADDRESS

PO BOX 248

SPOKANE, WA 99210-0248

MISCELLANEOUS

PREGNANT & POST-PARTUM

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE OUTPATIENT PPW
* OUTPATIENT PPW

32 1116 00 PIONEER CENTER EAST - SPOKANE

PIONEER HUMAN SERVICES 3400 WEST GARLAND AVENUE

SPOKANE, WA 99205

BRAD HUMPHRIES DIRECTOR

PHONE (509) 325-2355 FAX (509) 326-3370

MAILING ADDRESS

PO BOX 9838

SPOKANE, WA 99209

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* LONG-TERM RESIDENTIAL INVOLUNTARY COMMIT 53 BEDS
* SUB-ACUTE DETOXIFICATION INVOLUNTARY COMMIT 5 BEDS

32 1129 00 POWDER BASIN ASSOCIATES (SPOKANE)

POWDER BASIN FOUNDATION 301 EAST SHARP AVENUE SPOKANE, WA 99202

RICHARD PARRA ADMINISTRATOR

PHONE (509) 328-7352 FAX (509) 328-7358

MAILING ADDRESS

7905 MEADOWLARK WY STE C COEUR D' ALENE, ID 83814

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

32 1203 00 SOCIAL TREATMENT OPPORTUNITY PROGAMS II, INC. SPOKANE

9212 EAST MONTGOMERY AVENUE, SUITE 501

SPOKANE, WA 99206

VINCENT MCCRAY ADMINISTRATOR

PHONE (509) 927-3668 FAX (509) 892-6661

MAILING ADDRESS

9212 E MONTGOMERY AVE STE 501

SPOKANE, WA 99206

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

32 0121 00 SPARC -- SPOKANE ADDICTION RECOVERY CENTERS

(SHAW/WESTBROOK HOUSE)

1509 WEST 8TH AVENUE SPOKANE, WA 99204-7159 MARK BROWNLOW ADMINISTRATOR

PHONE (509) 624-3251 FAX (509) 624-4505

MAILING ADDRESS

PO BOX 20159

SPOKANE, WA 99204-7159

TREATMENT SERVICE TREATMENT FOCUS

* RECOVERY HOUSE 22 BEDS

32 0121 02 SPARC INTENSIVE INPATIENT SERVICES (CHRISTOPH HOUSE/DELANEY)

BRANCH OF SPOKANE ADDICTION RECOVERY CENTERS (SPARC)

WEST 1403 7TH AVENUE SPOKANE, WA 99204-7159 MARK BROWNLOW ADMINISTRATOR

PHONE (509) 624-3251 FAX (509) 624-4505

MAILING ADDRESS

PO BOX 20159

SPOKANE, WA 99204-7159

TREATMENT SERVICE TREATMENT FOCUS

INTENSIVE INPATIENT COD-MHC 22 BEDS

32 0121 01 SPARC OUTPATIENT SERVICES

BRANCH OF SPOKANE ADDICTION RECOVERY CENTERS (SPARC)

1508 WEST SIXTH AVENUE SPOKANE. WA 99204-7159 MARK BROWNLOW ADMINISTRATOR

PHONE (509) 624-5228 FAX (509) 624-4505

MAILING ADDRESS

PO BOX 20159

SPOKANE, WA 99204-7159

MISCELLANEOUS

ON-LINE REPORTING

SPOKANE

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT ADULT ADULT

32 0122 00 SPOKANE MENTAL HEALTH

103 EAST FIRST AVENUE SPOKANE, WA 99202 TOM ANDERSON, MED

DIRECTOR

PHONE (509) 838-4651 TTY (509) 624-0004 FAX (509) 458-7449

MAILING ADDRESS

% 107 SO DIVISION SPOKANE, WA 99202-1586

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

OUTPATIENT COD

32 0200 00 STEPPS - YOUTH FAMILY ADULT (YFA) CONNECTIONS

901 EAST SECOND, SUITE 100 SPOKANE, WA 99202-2206 CATHERINE DORAN AGENCY ADMINISTRATOR

PHONE (509) 532-2000 FAX (509) 532-2005

MAILING ADDRESS

901 E SECOND STE 100 SPOKANE, WA 99202-2206

MISCELLANEOUS

PREGNANT & POST-PARTUM YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

ADULTS, PPW, COD ADULTS, PPW, COD

* OUTPATIENT

INTENSIVE OUTPATIENT

SUN RAY COURT (ADULT MALE BRANCH)
BRANCH OF NEW HORIZON CARE CENTERS, INC.

518 SOUTH BROWNE STREET

SPOKANE, WA 99202

THOMAS L. COOK

BRANCH ADMINISTRATOR

PHONE (509) 456-5465 FAX (509) 456-5710

MAILING ADDRESS

PO BOX 4627

SPOKANE, WA 99220-0627

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE INPATIENT ADULT MALES 12 BEDS
* LONG-TERM RESIDENTIAL ADULT MALES 32 BEDS

32 0838 00

32 0462 00 THE HEALING LODGE OF THE SEVEN NATIONS

INLAND TRIBAL CONSORTIUM

5600 EAST 8TH AVE

SPOKANE, WA 99212-0220

LOUELLA HEAVYRUNNER ADMINISTRATIVE DIRECTOR

PHONE (509) 533-6910 FAX (509) 535-2863

MAILING ADDRESS

5600 EAST 8TH AVE SPOKANE, WA 99212-0220

MISCELLANEOUS

NATIVE AMERICAN

YOUTH

TREATMENT SERVICE

* INTENSIVE INPATIENT

TREATMENT FOCUS

NATIVE AMERICAN YTH 30 BEDS

32 0124 00 VETERANS ADMINISTRATION MEDICAL CENTER

SUBSTANCE ABUSE TREATMENT PROGRAMS BHS USVAMC

4815 NORTH ASSEMBLY DRIVE SPOKANE, WA 99205-6197 PAUL NICOLAI, COORDINATOR SUBSTANCE ABUSE PROGRAMS

PHONE (509) 434-7014 FAX (509) 434-7149

MAILING ADDRESS

4815 N ASSEMBLY DR - 116/668/SATP

SPOKANE, WA 99205-6197

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

VETERANS

VETERANS

VETERANS

VETERANS

STEVENS

33 0099 00 SPOKANE TRIBE OF INDIANS SUBSTANCE ABUSE PROGRAM

SPOKANE TRIBAL HEADQUARTERS

WELLPINIT, WA 99040

BOB BRISBOIS DIRECTOR

PHONE (509) 258-7502

1-800-789-4282 EXT 18

FAX (509) 258-7029

MAILING ADDRESS

PO BOX 540

WELLPINIT, WA 99040

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

DUI ASSESSMENT

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN:

YOUTH & ADULTS

33 0125 01 STEVENS COUNTY COUNSELING SERVICES / CHEWELAH

> E. 301 CLAY, ROOM #201 CHEWELAH, WA 99109

DAVID NIELSEN **EXECUTIVE DIRECTOR**

(509) 684-4597 PHONE

TTY (509) 684-7565 FAX (509) 935-4897

MAILING ADDRESS

PO BOX 905

CHEWELAH, WA 99109-0905

MISCELLANEOUS

YOUTH

TREATMENT FOCUS

ADULT & YOUTH **ADULT & YOUTH ADULT & YOUTH ADULT & YOUTH**

ADULT & YOUTH

TREATMENT SERVICE ADATSA ASSESSMENT CENTER

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

* INTENSIVE OUTPATIENT

* OUTPATIENT

33 0125 00 STEVENS COUNTY COUNSELING SERVICES CENTER / COLVILLE

165 EAST HAWTHORNE AVENUE

COLVILLE, WA 99114

DAVID NIELSEN **EXECUTIVE DIRECTOR**

PHONE (509) 684-4597 TTY (509) 684-7565 FAX (509) 684-5286

MAILING ADDRESS

165 E HAWTHORNE AVE COLVILLE, WA 99114

MISCELLANEOUS

PREGNANT & POST-PARTUM

* ADATSA ASSESSMENT CENTER

YOUTH

ON-LINE REPORTING TREATMENT SERVICE

TREATMENT FOCUS

ADULT & YOUTH ADULT & YOUTH ALCOHOL & DRUG INFORMATION SCHOOL ADULT & YOUTH **ADULT & YOUTH ADULT & YOUTH**

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

THURSTON

34 0892 00 ALTERNATIVES PROFESSIONAL COUNSELING, INC. (OLYMPIA)

203 4TH AVENUE E, SUITE 301-304

OLYMPIA, WA 98501

GREG HAMMOND ADMINISTRATOR

PHONE (360) 357-7986 FAX (360) 534-9595

MAILING ADDRESS

203 4TH AVE E #301 -304 OLYMPIA, WA 98501

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

BHR RECOVERY SERVICES-OLYMPIA

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

34 0201 00

BEHAVIORAL HEALTH RESOURCES 325 4TH AVENUE EAST OLYMPIA, WA 98501-1191

CARL FLOWERS PROGRAM DIRECTOR

PHONE (360) 704-7170 FAX (360) 704-7182

MAILING ADDRESS

325 4TH AVE E

OLYMPIA, WA 98501-1191

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

TREATMENT FOCUS

34 0126 00 CRISIS CLINIC OF THURSTON AND MASON COUNTIES

> BEHAVIORAL HEALTH RESOURCES POST OFFICE BOX 2463

OLYMPIA, WA 98507

BEV PETERSON EXECUTIVE DIRECTOR

PHONE (360) 586-2800

MAILING ADDRESS 3857 MARTIN WAY E OLYMPIA, WA 98506-5218

TREATMENT SERVICE * CRISIS INTERVENTION TREATMENT FOCUS

DAMON COUNSELING SERVICES 34 0667 00

4438 PACIFIC AVENUE SOUTHEAST

LACEY, WA 98503

JEANNE M. GUILL ADMINISTRATOR/OWNER

PHONE (360) 491-0920 (360) 491-9617 FAX

MAILING ADDRESS

4438 PACIFIC AVE SE LACEY, WA 98503

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

THURSTON

34 1212 00 DISCOVERY COUNSELING

306 2ND STREET N.E. YELM, WA 98597 ROBERT BROMBERG EXECUTIVE DIRECTOR

PHONE (360) 400-2242 FAX (360) 400-2471

MAILING ADDRESS

306 2ND ST NE YELM, WA 98597

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

34 0774 00

DOC - CEDAR CREEK CORRECTIONS CENTER

OCO/CD TREATMENT SERVICES 12200 BORDEAUX ROAD LITTLEROCK, WA 98556

PATTY NOBLE CD PROGRAMS ADMINISTRATOR

PHONE (360) 753-7278 FAX (360) 586-5826

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE
* INTENSIVE OUTPATIENT

TREATMENT FOCUS

CORRECTIONAL

34 1199 00

DOC - OLYMPIA MAIN FIELD OFFICE

OCO/CD TREATMENT SERVICES 3700 MARTIN WAY, SUITE 104 OLYMPIA, WA 98516

PATTY NOBLE

CD PROGRAM ADMINISTRATOR

PHONE FAX (360) 459-6370 (360) 407-0075

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

TREATMENT SERVICE INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS
CORRECTIONS

CORRECTIONS

34 0936 00

DOC - OLYMPIA WORK RELEASE

OCO/CD TREATMENT SERVICES 1800 - 11TH AVENUE S.W. OLYMPIA, WA 98504-1140

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

OUTPATIENT

TREATMENT FOCUS CORRECTIONAL MEN

NISQUALLY TRIBAL SUBSTANCE ABUSE & PREVENTION PROGRAM 34 0281 00

> NISQUALLY INDIAN TRIBE 4816 SHE-NAH-NUM DRIVE S.E. OLYMPIA, WA 98513

LINDA KRAMER PROGRAM DIRECTOR

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MAILING ADDRESS

4816 SHE-NAH-NUM DR SE OLYMPIA, WA 98513

MISCELLANEOUS

NATIVE AMERICAN

YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

NATIVE AM/NISQUALLY NATIVE AM/NISQUALLY NATIVE AM/NISQUALLY NATIVE AMERICAN

NORTHWEST RESOURCES II, INC. 34 0616 00

> 2708 WESTMOOR CT. S.W. OLYMPIA, WA 98502

CINDY BROWN ADMINISTRATOR

(360) 943-8810 PHONE FAX (360) 943-0931

MAILING ADDRESS 2708 WESTMOOR CT SW OLYMPIA, WA 98502

MISCELLANEOUS

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TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

HISPANIC

HISPANIC

34 1102 00 SEA MAR OUTPATIENT SUBSTANCE ABUSE SERVICES-OLYMPIA

> SEA MAR COMMUNITY HEALTH CENTERS 409 CUSTER WAY, SUITE D

TUMWATER, WA 98501

NISTON FRANCO

BEHAVIORAL HEALTH SITE MANAGER

PHONE (360) 570-8258 (360) 570-1171 FAX

MAILING ADDRESS

409 CUSTER WAY STE D TUMWATER, WA 98501

MISCELLANEOUS

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TREATMENT FOCUS TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

* INTENSIVE OUTPATIENT

HISPANIC * OUTPATIENT HISPANIC

155

THURSTON

34 1119 00 SOUTH SOUND CLINIC OF EVERGREEN TREATMENT SERVICES

BRANCH OF EVERGREEN TREATMENT SERVICES

6700 MARTIN WAY EAST, SUITE 117

OLYMPIA, WA 98516

RON JACKSON **EXECUTIVE DIRECTOR**

PHONE (360) 413-6910 FAX (360) 413-9026

MAILING ADDRESS

% 1700 AIRPORT WY S SEATTLE, WA 98134-1618

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* OPIATE DEPENDENCY TREATMENT

ST. PETER CHEMICAL DEPENDENCY CENTER - MAIN FACILITY 34 0153 00

> (PROVIDENCE ST. PETER) 4800 COLLEGE STREET S.E.

LACEY, WA 98503

MIKE KERLIN PROGRAM DIRECTOR

PHONE (360) 456-7575

1-800-332-0465 **TOLL FREE**

FAX (360) 493-5088

MAILING ADDRESS

4800 COLLEGE ST SE LACEY, WA 98503

MISCELLANEOUS

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ACUTE DETOXIFICATION 4 BEDS

ADATSA ASSESSMENT CENTER

DUI ASSESSMENT

* INTENSIVE INPATIENT ALSO YOUTH 46 BEDS

* INTENSIVE OUTPATIENT

* OUTPATIENT

ST. PETER CHEMICAL DEPENDENCY CENTER, OLYMPIA BRANCH 34 0153 01

AT THURSTON COUNTY CORRECTIONAL FACILITY

THURSTON COUNTY COURTHOUSE

OLYMPIA, WA 98502

MIKE KERLIN PROGRAM DIRECTOR

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MAILING ADDRESS

% 4800 COLLEGE ST SE LACEY, WA 98503

MISCELLANEOUS

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ADULT INMATES

ADULT INMATES

34 0514 00 THE RIGHT STEP, INC. - OLYMPIA MAIN FACILITY

801 SLEATER - KINNEY RD., SUITE 20

LACEY, WA 98509-8688

INGRID L. KAIL OWNER/OPERATOR

PHONE (360) 923-9585 FAX (360) 493-0474

MAILING ADDRESS

PO BOX 8688

LACEY, WA 98509-8688

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

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TREATMENT FOCUS

34 0996 00 TRUE NORTH - ESD 113 - THURSTON (STUDENT ASSISTANCE PROGRAM)

EDUCATIONAL SERVICE DISTRICT 113 - MAIN FACILITY

601 MCPHEE ROAD S.W. OLYMPIA, WA 98502-5080 ROB VINCENT DIRECTOR

PHONE (360) 464-6870 HDQTRS

(360) 464-6872 LEAD COUNS

FAX (360) 464-6906

MAILING ADDRESS

601 MCPHEE RD SW OLYMPIA, WA 98502-5080

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YOUTH

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE OUTPATIENT ADOLESCENTS
* OUTPATIENT ADOLESCENTS

34 1057 00 TRUE NORTH - ESD 113 - YELM

EDUCATIONAL SERVICE DISTRICT 113 - BRANCH

1315 YELM HIGHWAY YELM, WA 98597

ROB VINCENT SAP DIRECTOR

PHONE (360

(360) 464-6870 HDQTRS (360) 464-6872 LEAD COUNS (360)458-6233 SCHOOL #

MAILING ADDRESS

% 601 MCPHEE RD SW OLYMPIA, WA 98502-5080

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* INTENSIVE OUTPATIENT

* OUTPATIENT

YOUTH YOUTH

WAHKIAKUM

35 0015 02 WAHKIAKUM CHEMICAL DEPENDENCY SERVICES

42 ELOCHOMAN VALLEY ROAD CATHLAMET, WA 98612

JOELL ARCHIBALD, RN, MBA DIRECTOR-WAHKIAKUM COUNTY H&HS

PHONE (360) 795-8630 FAX (360) 795-6224

WAHKIAKUM

MAILING ADDRESS

42 ELOCHOMAN VALLEY RD CATHLAMET, WA 98612

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PREGNANT & POST-PARTUM YOUTH

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE

ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

- * INTENSIVE OUTPATIENT
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WALLA WALLA

DOC - WASHINGTON STATE PENITENTIARY 36 0759 00

> OCO/CD TREATMENT SERVICES 1313 NORTH 13TH STREET WALLA WALLA, WA 99362

PATTY NOBLE CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469

(360) 407-3961

FAX

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS INTENSIVE OUTPATIENT CORRECTIONAL

36 1189 00 NORTHWEST COUNSELING SOLUTIONS, LLC

> 315 EAST MAIN ST., SUITE A WALLA WALLA, WA 99362

LISA SMYTH **ADMINISTRATOR**

PHONE (509) 525-8844 (509) 525-7755 FAX

MAILING ADDRESS

315 E MAIN ST STE A

WALLA WALLA, WA 99362-2003

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

TREATMENT FOCUS

36 1074 00 SERENITY POINT COUNSELING SERVICES, LLC

> (SERVING HISPANIC & ENGLISH CLIENTS) 705 W. ROSE SUITE 1

WALLA WALLA, WA 99362

PATRICK C. FLORES, MSW, CDP

ADMINISTRATOR

(509) 529-6036 PHONE (509) 529-6037

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705 W ROSE STE 1

WALLA WALLA, WA 99362

MISCELLANEOUS

SPANISH

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* OUTPATIENT

TREATMENT FOCUS

ADULTS

ADULT/HISPANIC

ADULT/HISPAN.&ENGLIS ADULT/YOUTH/HISPANIC

ADULT/YOUTH/HISPANIC

36 0131 00 VETERANS ADMINISTRATION MEDICAL CENTER - WALLA WALLA

CHEMICAL DEPENDENCY TREATMENT UNIT

77 WAINWRIGHT DRIVE WALLA WALLA, WA 99362 DAVE BEEBE PROGRAM MANAGER

PHONE (509) 525-5200 EXT 22671

MAILING ADDRESS

77 WAINWRIGHT DR (CD UNIT) WALLA WALLA, WA 99362

MISCELLANEOUS

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TREATMENT SERVICE

TREATMENT FOCUS

INTENSIVE INPATIENT OUTPATIENT

21 BEDS

36 1128 00 WALLA WALLA COUNTY - DEPARTMENT OF HUMAN SERVICES

310 WEST POPLAR STREET (MOVE PND 9-2005)

WALLA WALLA, WA 99362

SHARON SAFFER DIRECTOR

PHONE (509) 527-3278 FAX (509) 527-3219

MAILING ADDRESS

PO BOX 1595

WALLA WALLA, WA 99362

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TREATMENT FOCUS

* CRISIS INTERVENTION

WHATCOM

37 0446 00 AVALON COUNSELING & TREATMENT SERVICES (FERNDALE)

5778 2ND AVENUE, SUITE B FERNDALE, WA 98248 LADELL FORD ADMINISTRATOR

PHONE (360) 384-5329 FAX (360) 384-5329

MAILING ADDRESS

PO BOX 703

FERNDALE, WA 98248-0703

MISCELLANEOUS

YOUTH

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TREATMENT FOCUS

37 0386 00

BELAIR CLINIC - ALTERNATIVES TO ADDICTION

1130 NORTH STATE STREET BELLINGHAM, WA 98225

RAMON ROGERS TREATMENT DIRECTOR

PHONE (360) 676-4485

MAILING ADDRESS

1130 NORTH STATE STREET BELLINGHAM, WA 98225

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

37 0134 00

CONTACT COUNSELING

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ADMINISTRATOR PHONE (360) 671-3277

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TREATMENT SERVICE DUI ASSESSMENT

TREATMENT FOCUS & GENERAL CD ASSMTS

37 0933 00

DOC - BELLINGHAM FIELD OFFICE

OCO/CD TREATMENT SERVICES 1111 CORNWALL AVENUE, SUITE 200

BELLINGHAM, WA 98225

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

FAX

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PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

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37 0227 00

LUMMI COUNSELING SERVICES

2592 KWINA ROAD BELLINGHAM, WA 98226 **ROSALIE SCOTT** COORDINATOR

MAILING ADDRESS

2400 LUMMI VIEW DR BELLINGHAM, WA 98226 PHONE (360) 384-2323

MISCELLANEOUS

NATIVE AMERICAN

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN NATIVE AMERICAN

37 0230 00 No

NOOKSACK TRIBE'S GENESIS II

NOOKSACK TRIBAL ALCOHOLISM PROGRAM 6750 MISSION ROAD EVERSON, WA 98247

PETER JOSEPH DIRECTOR

PHONE (360) 966-7704 FAX (360) 966-4225

MAILING ADDRESS

6750 MISSION RD EVERSON, WA 98247

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

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37 0819 00

PACIFIC RECOVERY AND HEALING CENTER, INC.

3082 NORTHWEST AVENUE BELLINGHAM, WA 98225 JANICE EDIN ADMINISTRATOR

PHONE (360) 715-8959 FAX (360) 715-9640

MAILING ADDRESS

3082 NORTHWEST AVE BELLINGHAM, WA 98225

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS

37 0786 00

RECOVERY CENTER

CATHOLIC COMMUNITY SERVICES NORTHWEST 2806 DOUGLAS AVENUE BELLINGHAM, WA 98225

DONNA WELLS CO-DIRECTOR

PHONE (360) 676-2187 FAX (360) 676-2162

MAILING ADDRESS

2806 DOUGLAS AVE

BELLINGHAM, WA 98225-6930

MISCELLANEOUS

PREGNANT & POST-PARTUM YOUTH

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- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

ADULT/YOUTH SERVICES YOUTH DETENTION YOUTH PROBATION CO-OCCURRING DISORD

37 0958 00

SEA MAR - VISIONS (BELLINGHAM)

BRANCH OF SEA MAR COMMUNITY HEALTH CENTERS 1603 EAST ILLINOIS STREET BELLINGHAM, WA 98226

JEANETTE PALMER ADMINISTRATOR

PHONE (360) 647-4266 FAX (360) 647-6057

MAILING ADDRESS

1603 E ILLINOIS ST BELLINGHAM, WA 98226

MISCELLANEOUS

YOUTH

TREATMENT SERVICE

* INTENSIVE INPATIENT * RECOVERY HOUSE TREATMENT FOCUS

FEMALE ADOLESCENT 25 BEDS YOUTH 6 BEDS

37 0521 00

SEA MAR SUBSTANCE ABUSE OUTPATIENT SERVICES -- MAIN FACILITY

SEA MAR COMMUNITY HEALTH CENTERS 4455 CORDATA PARKWAY BELLINGHAM, WA 98226-8037

CLAUDIA D'ALLEGRI ADMINISTRATOR

PHONE (360) 734-5458 FAX (360) 734-5298

MAILING ADDRESS

4455 CORDATA PKWY BELLINGHAM, WA 98226-8037

MISCELLANEOUS

SPANISH YOUTH

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LOW INC/HOMELESS LOW INC/HOMELESS LOW INC/HOMELESS LOW INC/HOMELESS

TREATMENT SERVICE
ALCOHOL & DRUG INFORMATION SCHOOL
DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

37 0345 00

ST. JOSEPH HOSPITAL - BELLINGHAM

RECOVERY CENTER FOR ALCOHOLISM & ADDICTION 809 EAST CHESTNUT STREET, 3RD FLOOR BELLINGHAM, WA 98225-1898

RICHARD GEIGER DIRECTOR

PHONE (360) 715-6400

(360) 715-6416 DETOX

FAX (360) 715-6468

MAILING ADDRESS

809 E CHESTNUT ST, 3RD FL BELLINGHAM, WA 98225-1898

MISCELLANEOUS

JCAHO ACCREDITED PREGNANT & POST-PARTUM

TREATMENT SERVICE

CE TREATMENT FOCUS

* ACUTE DETOXIFICATION ALCOHOL & DRUG INFORMATION SCHOOL

* INTENSIVE INPATIENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

2 BEDS

20 BEDS

37 0900 00 ST. JOSEPH HOSPITAL - FERNDALE BRANCH

RECOVERY CENTER - ST. JOSEPH HOSPITAL / PEACE HEALTH

2376 MAIN STREET, SUITE 1 FERNDALE, WA 98248 RICHARD GEIGER DIRECTOR

PHONE (360) 384-2427 FAX (360) 384-1559

MAILING ADDRESS

2376 MAIN ST STE 1 FERNDALE, WA 98248

MISCELLANEOUS

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* INTENSIVE OUTPATIENT

* OUTPATIENT

TREATMENT FOCUS

ADULT, PPW ADULT, PPW

37 0689 00 THE CENTER - LYNDEN

310 FIFTH STREET

LYNDEN, WA 98264-1911

JAMES SOARES

ADMINISTRATOR/OWNER

PHONE (360) 354-5120

MAILING ADDRESS

310 FIFTH ST

LYNDEN, WA 98264-1911

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TREATMENT SERVICE
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DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

37 1136 00

WESTCOAST COUNSELING AND TREATMENT CENTER

1200 DUPONT, SUITE 1A BELLINGHAM, WA 98225 LINDA WALLER CO-DIRECTOR

PHONE (360) 647-7577 FAX (360) 671-1424

MAILING ADDRESS

1200 DUPONT STE 1A BELLINGHAM, WA 98225

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* INTENSIVE OUTPATIENT

* OUTPATIENT

37 1196 00 WHATCOM COMMUNITY DETOX

> BRANCH OF PIONEER HUMAN SERVICES 1211 GIRARD STREET

BELLINGHAM, WA 98225

BILL GLEGHORN **DETOX MANAGER**

TREATMENT FOCUS

PHONE (360) 734-2867 (360) 734-2106 FAX

MAILING ADDRESS 1211 GIRARD ST BELLINGHAM, WA 98225

TREATMENT SERVICE TREATMENT FOCUS

* SUB-ACUTE DETOXIFICATION 8 BEDS

37 0137 00 WHATCOM COUNTY DISTRICT COURT PROBATION

> ASSESSMENT UNIT 311 GRAND AVENUE, SUITE 406

BRUCE VAN GLUBT BELLINGHAM, WA 98225-5596 ADMINISTRATOR

> PHONE (360) 676-6708 FAX (360) 738-2452

MAILING ADDRESS 311 GRAND AVE STE 406 BELLINGHAM, WA 98225-5596

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TREATMENT SERVICE TREATMENT FOCUS DUI ASSESSMENT & GENERAL CD ASSMTS

WHITMAN

38 0755 00 PALOUSE RECOVERY CENTER, LLC - PULLMAN

1240 SE BISHOP BLVD, SUITE P PULLMAN, WA 99163

JEAN IVERSON **ADMINISTRATOR**

PHONE (509) 334-0718 (509) 334-0361 FAX

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MISCELLANEOUS

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TREATMENT SERVICE ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT OUTPATIENT

TREATMENT FOCUS ADULT/ADOLESCENT

ADULT/ADOLESCENT ADULT/ADOLESCENT 38 0138 00 PALOUSE RIVER COUNSELING CENTER

NE 340 MAPLE STREET PULLMAN, WA 99163 MIKE BERNEY DIRECTOR

PHONE (509) 334-1133 FAX (509) 332-1608

MAILING ADDRESS

NE 340 MAPLE ST PULLMAN, WA 99163

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ADULT/YOUTH ADULT/YOUTH

YAKIMA

39 0406 00 AJ CONSULTANTS

122 SOUTH THIRD STREET YAKIMA, WA 98901 JANICE M. BURKE DIRECTOR

PHONE (509) 248-0133 FAX (509) 248-9602

MAILING ADDRESS 122 S. THIRD ST.

YAKIMA, WA 98901

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

OUTPATIENT

39 1214 00

APPLE VALLEY COUNSELING SERVICE

505 NORTH 4TH STREET, SUITE #2 YAKIMA, WA 98901

ADMINISTRATOR

WILLIAM ELLIS

PHONE (509) 452-1000

1-877-452-2827

TOLL-FREE

FAX (509) 829-3142

MAILING ADDRESS

PO BOX 639 YAKIMA, WA 98907

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT OUTPATIENT TREATMENT FOCUS

39 1050 00 **AURORA COUNSELING SERVICES (YAKIMA)**

6 SOUTH 2ND STREET, SUITE 901

YAKIMA, WA 98901

ELIZABETH WHITTINGTON ADMINISTRATOR

same as phone

(509) 469-9335 PHONE

FAX

MAILING ADDRESS

6 S 2ND ST STE 901 YAKIMA, WA 98901

TREATMENT SERVICE

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ADULTS ADULTS

39 0503 00 **BARTH CLINIC - YAKIMA**

201 EAST LINCOLN AVENUE

YAKIMA, WA 98901

JAMES BARTH **ADMINISTRATOR**

PHONE (509) 457-5653 FAX (509) 457-3107

MAILING ADDRESS

PO BOX 1207

YAKIMA, WA 98907-1207

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TREATMENT FOCUS

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39 1254 00

BARTH CLINIC - ZILLAH BRANCH

513 MAIN STREET, LOWER LEVEL

ZILLAH, WA 98953

JIM BARTH ADMINISTRATOR

PHONE (509) 829-6440

FAX

(509) 829-6440

MAILING ADDRESS

PO BOX 1207

YAKIMA, WA 98907-1207

TREATMENT SERVICE

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DUI ASSESSMENT INTENSIVE OUTPATIENT TREATMENT FOCUS

39 0500 01

CASA DE ESPERANZA -- BEHAVIORAL HEALTH SERVICES

YAKIMA VALLEY FARM WORKERS CLINIC

402 NORTH 4TH STREET, SUITE 300

YAKIMA, WA 98901

VICENTE A. MORAN, MSW CLINICAL DIRECTOR

PHONE

(509) 453-9387 1-800-303-9387

FAX

(509) 453-2716

MAILING ADDRESS

402 N 4TH ST STE 300 YAKIMA, WA 98901

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TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

YOUTH & ADULT YOUTH & ADULT YOUTH & ADULT YOUTH & ADULT

39 0500 03 CASA DE ESPERANZA - GRANDVIEW

YAKIMA VALLEY FARM WORKERS CLINIC 300 DIVISION STREET GRANDVIEW, WA 98930

VICENTE A. MORAN, MSW CLINICAL DIRECTOR

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MAILING ADDRESS

300 DIVISION ST GRANDVIEW, WA 98930

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ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

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39 0960 00

CENTER FOR ADDICTIONS RECOVERY AND EDUCATION (CARE)

CENTER FOR COUNSELING AND PSYCHOTHERAPY, INC., P.S. 1015 SOUTH 40TH AVENUE, SUITE 23 YAKIMA, WA 98908

STEPHEN A. YOUNKER, ED.D. DIRECTOR

PHONE (509) 966-7246 FAX (509) 966-5731

MAILING ADDRESS

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MISCELLANEOUS

YOUTH

TREATMENT SERVICE

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TREATMENT FOCUS

ADULT/ADOLESCENTS ADULT/ADOLESCENTS ADULT/ADOLESCENTS ADULT/ADOLESCENTS 39 0205 00 CENTRAL WASHINGTON COMPREHENSIVE MENTAL HEALTH

OPIATE DEPENDENCY TREATMENT PROGRAM

402 S. 4TH AVENUE RICK WEAVER YAKIMA, WA 98902 CEO

PHONE (509) 575-4024

(509) 575-4084

FAX (509) 576-4341

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YAKIMA, WA 98902

MISCELLANEOUS

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TREATMENT SERVICE TREATMENT FOCUS

* OPIATE DEPENDENCY TREATMENT COD
* OUTPATIENT COD

39 0820 00 COMMUNITY COUNSELING CLINIC LLC (UNION GAP)

2642 MAIN STREET CAROLYN K. FRIES UNION GAP, WA 98903 SR. MEMBER

PHONE (509) 452-6546 FAX (509) 452-6965

MAILING ADDRESS PO BOX 3036

UNION GAP, WA 98903-3036

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

39 1080 00 COMMUNITY RESOURCE GROUP - SUNNYSIDE

321 EAST EDISON D. KEITH LAMM SUNNYSIDE, WA 98944 DIRECTOR

PHONE (509) 830-9225 FAX (509) 965-1661

MAILING ADDRESS
PO BOX 1213

SUNNYSIDE, WA 98944

MISCELLANEOUS
ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

OUTPATIENT

39 1081 00 COMMUNITY RESOURCE GROUP - YAKIMA

7901 WEST NOB HILL BLVD. D. KEITH LAMM YAKIMA, WA 98908 DIRECTOR

PHONE (509) 965-5216 FAX (509) 961-1661 MAILING ADDRESS

7901 W NOB HILL BLVD YAKIMA, WA 98908

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT OUTPATIENT

TREATMENT FOCUS

39 1197 00

DELOZIER RECOVERY SERVICES

3908 CREEKSIDE LOOP, SUITE 125

YAKIMA, WA 98902

LISA MARIE DELOZIER **ADMINISTRATOR**

PHONE (509) 469-5515

FAX

(509) 469-5517

MAILING ADDRESS

3908 CREEKSIDE LP STE 125

YAKIMA, WA 98902

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT INTENSIVE OUTPATIENT

OUTPATIENT

TREATMENT FOCUS

39 1256 00

DEPENDENCY HEALTH SERVICES - SUNNYSIDE OFFICE

BRANCH OF CENTRAL WASHINGTON COMPHREHENSIVE MENTAL HEALTH

1319 SAUL ROAD SOUTH SUNNYSIDE, WA 98944

CHRIS DEVILLINEUVE **DIVISION DIRECTOR**

PHONE (509) 837-2089

(509) 837-2244 FAX

MAILING ADDRESS

PO BOX 959

YAKIMA, WA 98907

TREATMENT SERVICE TREATMENT FOCUS

DUI ASSESSMENT

INTENSIVE INPATIENT

INTENSIVE OUTPATIENT

OUTPATIENT

CO-OCCURING 6 BEDS

39 0490 01

DEPENDENCY HEALTH SERVICES - YAKIMA DETOXIFICATION

BRANCH OF CENTRAL WASHINGTON COMPREHENSIVE MENTAL HEALTH

505 SOUTH 4TH AVENUE

YAKIMA, WA 98902-3240

RICK WEAVER

PROGRAM ADMINISTRATOR

PHONE (509) 453-2900

 FAX

(509) 453-9954

MAILING ADDRESS

505 S 4TH AVE

YAKIMA, WA 98902-3240

MISCELLANEOUS

JCAHO ACCREDITED

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* SUB-ACUTE DETOXIFICATION

COD ADULT & YOUTH

20 BEDS

39 0490 00

DEPENDENCY HEALTH SERVICES - YAKIMA OUTPATIENT

BRANCH OF CENTRAL WASHINGTON COMPREHENSIVE MENTAL HEALTH

3703 RIVER ROAD, SUITE 4

YAKIMA, WA 98902-3240

RICK WEAVER

PROGRAM ADMINISTRATOR

PHONE FAX

(509) 248-1200 (509) 972-1318

MAILING ADDRESS

3703 RIVER RD STE 4 YAKIMA, WA 98902-3240

MISCELLANEOUS

PREGNANT & POST-PARTUM

YOUTH

ON-LINE REPORTING

TREATMENT FOCUS

TREATMENT SERVICE DUI ASSESSMENT

* INTENSIVE OUTPATIENT

COD

* OUTPATIENT

COD

39 0918 00

DOC - AHTANUM VIEW CORRECTIONAL COMPLEX ASSISTED LIVING FACILITY

OCO/CD TREATMENT SERVICES

2009 SOUTH 64TH AVENUE

YAKIMA, WA 98903

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE FAX

(360) 493-6469 (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

INTENSIVE OUTPATIENT

TREATMENT FOCUS

CORRECTIONS

39 0765 00

DOC - AHTANUM VIEW WORK RELEASE

OCO/CD TREATMENT SERVICES

2009 SOUTH 64TH AVENUE

YAKIMA, WA 98903

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE FAX (360) 493-6469 (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123)

OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS
CORRECTIONAL

* OUTPATIENT

39 1091 00 DOC - YAKIMA COMMUNITY JUSTICE CENTER

OCO/CD TREATMENT SERVICES 202 W. YAKIMA AVE., #200

YAKIMA, WA 98902

PATTY NOBLE

CD PROGRAMS ADMINISTRATOR

PHONE (360) 493-6469 FAX (360) 407-3961

MAILING ADDRESS

PO BOX 41123 (MS 41123) OLYMPIA, WA 98504-1123

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE
INTENSIVE OUTPATIENT
OUTPATIENT

TREATMENT FOCUS

OFFENDERS OFFENDERS

39 0141 00 MERIT RESOURCE SERVICES - SUNNYSIDE

702 FRANKLIN SUNNYSIDE, WA 98944 DAVID L. WILSON EXECUTIVE DIRECTOR

PHONE (509) 837-7700 FAX (509) 839-7311

MAILING ADDRESS

P.O. BOX 997

SUNNYSIDE, WA 98944

MISCELLANEOUS

SPANISH YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

39 0141 01 MERIT RESOURCE SERVICES - TOPPENISH BRANCH

217 SOUTH TOPPENISH AVENUE TOPPENISH, WA 98948

DAVID L. WILSON EXECUTIVE DIRECTOR

PHONE (509) 865-5233 FAX (509) 865-6505

MAILING ADDRESS

PO BOX 366

TOPPENISH, WA 98948-0366

MISCELLANEOUS

SPANISH

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

39 0832 00 **MERIT RESOURCE SERVICES - WAPATO BRANCH**

> 312 WEST 2ND STREET WAPATO, WA 98951

ANGELA KNIGHT **EXECUTIVE DIRECTOR**

PHONE (509) 877-7271 FAX (509) 877-3532

MAILING ADDRESS

PO BOX 1067 WAPATO, WA 98951

MISCELLANEOUS

SPANISH YOUTH

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT**

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

TREATMENT FOCUS

YOUTH, HISPANIC, YOUTH, HISPANIC, AND NATIVE AMERICAN AND NATIVE AMERICAN

MERIT RESOURCE SERVICES - YAKIMA 39 1078 00

> 414 NORTH 3RD STREET YAKIMA, WA 98901

SHEREEN HUNT **BRANCH ADMINISTRATOR**

PHONE (509) 469-9366 FAX (509) 469-9926

MAILING ADDRESS PO BOX 376 YAKIMA, WA 98907

MISCELLANEOUS ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

- * INTENSIVE OUTPATIENT
- * OUTPATIENT

39 0496 00

PHOENIX SUPPORT SERVICES - GRANDVIEW

PHOENIX SUPPORT SERVICES, INC.

242 DIVISION

GRANDVIEW, WA 98930

CARMEN STREBER PH. D ADMINISTRATOR

PHONE (509) 882-4227 (509) 882-5110 FAX

MAILING ADDRESS

P.O. BOX 126

GRANDVIEW, WA 98930

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

ALCOHOL & DRUG INFORMATION SCHOOL **DUI ASSESSMENT** INTENSIVE OUTPATIENT **OUTPATIENT**

TREATMENT FOCUS

39 0140 00 SUNDOWN M RANCH

2280 SR 821 SELAH, WA 98901 SCOTT MUNSON EXECUTIVE DIRECTOR

PHONE (509) 457-0990 FAX (509) 457-5313

MAILING ADDRESS

PO BOX 217 SELAH, WA 98942

MISCELLANEOUS

YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL

DUI ASSESSMENT

* INTENSIVE INPATIENT YOUTH ALSO 150 BEDS

* INTENSIVE OUTPATIENT

* OUTPATIENT

* RECOVERY HOUSE YOUTH 6 BEDS
* SUB-ACUTE DETOXIFICATION 4 BEDS

39 0139 00 TRIUMPH TREATMENT SERVICES

102 SOUTH NACHES AVENUE BETH DANNHARDT YAKIMA, WA 98907 DIRECTOR

PHONE (509) 248-1800 FAX (509) 576-3076

MAILING ADDRESS PO BOX 2849

YAKIMA, WA 98901

MISCELLANEOUS

PREGNANT & POST-PARTUM
YOUTH

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

ALCOHOL & DRUG INFORMATION SCHOOL DUI ASSESSMENT

DUI ASSESSMENT

* INTENSIVE OUTPATIENT

* OUTPATIENT

39 0139 01 TRIUMPH TREATMENT SERVICES - JAMES OLDHAM TREATMENT CENTER

BRANCH OF TRIUMPH TREATMENT SERVICES

201 HIGHLAND DRIVE BETH DANNHARDT BUENA, WA 98921 DIRECTOR

PHONE (509) 865-6705 FAX (509) 865-5011

MAILING ADDRESS PO BOX 2849 YAKIMA, WA 98901

MISCELLANEOUS
ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* INTENSIVE INPATIENT 50 BEDS
* LONG-TERM RESIDENTIAL COD-MHC/DUAL DISOR 14 BEDS

* RECOVERY HOUSE COD-MHC

39 0139 02 TRIUMPH TREATMENT SERVICES - RIEL HOUSE

BRANCH OF TRIUMPH TREATMENT SERVICES

613 SUPERIOR LANE YAKIMA, WA 98902 BETH DANNHARDT DIRECTOR

PHONE (509) 575-4810 FAX (509) 576-3060

MAILING ADDRESS

PO BOX 2849 YAKIMA, WA 98901

MISCELLANEOUS

PREGNANT & POST-PARTUM ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS

* LONG-TERM RESIDENTIAL WOMEN/PPW 14 BEDS

39 1070 00 VETERANS ADMINISTRATION - YAKIMA SUBSTANCE ABUSE OUTREACH

BRANCH OF VA MEDICAL CENTER-WALLA WALLA

310 NORTH 5TH AVENUE

YAKIMA, WA 98902

DAVE BEEBE PROGRAM MANAGER

PHONE (509) 457-2736 FAX (509) 457-1822

MAILING ADDRESS

% 77 WAINWRIGHT DR (CD TRTMT UNIT) WALLA WALLA, WA 99362

MISCELLANEOUS

JCAHO ACCREDITED

TREATMENT SERVICE TREATMENT FOCUS

OUTPATIENT VETERANS

39 0142 00 YAKAMA INDIAN NATION COMPREHENSIVE ALCOHOLISM PROGRAM

20 GUNNYON ROAD PATRICIA IKE

TOPPENISH, WA 98948 PROGRAM DIRECTOR

PHONE (509) 865-5121 EXT 4459

NATIVE AMERICAN

FAX (509) 865-4333

MAILING ADDRESS PO BOX 523

TOPPENISH, WA 98948

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE TREATMENT FOCUS
ALCOHOL & DRUG INFORMATION SCHOOL NATIVE AMERICAN

* OUTPATIENT

39 0253 00 YAKIMA COUNTY ASSESSMENT SERVICE

DUI AND ADATSA

128 N SECOND STREET - COURTHOUSE, ROOM B-18

YAKIMA, WA 98901

BRIAN HUNT

PROGRAM DIRECTOR

PHONE (509) 574-2749

FAX (509) 574-2741

MAILING ADDRESS

128 N SECOND ST, RM B-18 YAKIMA, WA 98901

TREATMENT SERVICE

* ADATSA ASSESSMENT CENTER DUI ASSESSMENT OUTPATIENT TREATMENT FOCUS

39 0947 00

YAKIMA COUNTY TASC

YAKIMA COUNTY ASSESSMENT AND REFERRAL SERVICE 128 N SECOND STREET - COURTHOUSE, ROOM B-18 YAKIMA, WA 98901

BRIAN HUNT

PROGRAM DIRECTOR

PHONE (509) 574-2749 FAX (509) 574-2741

MAILING ADDRESS

128 N 2ND ST RM B-18 YAKIMA, WA 98901

MISCELLANEOUS

ON-LINE REPORTING

TREATMENT SERVICE

TREATMENT FOCUS

* TASC TASC